

Surrey County Council

ANNUAL REPORT

OF THE

COUNTY MEDICAL OFFICER

For the Year 1945

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PREFACE.

To the Chairman and Members of the Surrey County Council.

MR. CHAIRMAN, LADIES AND GENTLEMEN, .

I have the honour to present my Report for the year 1945. The most conspicuous event in the year was the end of the War ; with the end of the War the necessity for the Civil Defence Services ceased and these Services which involved such a great strain on the staff of the Council and which were worked with a loyalty, devotion and efficiency to which I must pay a warm tribute, came to an end. Throughout the War the Public Health Department maintained a day and night service and every member of the Department voluntarily took his or her share in the exacting night service, and the Health Visitors in the northern part of the County sent in one of their number every night to be available in case there were injuries or casualties in the County Hall itself. There was a team, usually numbering five, and including a central office doctor, on duty throughout every night of the War ; the teams were arranged on a rota which for some of the most senior members involved duty every third night. I wish to express my personal gratitude to the members of my staff, all of whom voluntarily undertook this duty and carried it out devotedly, conscientiously and cheerfully. At the County Council's Control Centre for the part of the County situated in Guildford a team of Medical Officers, including a Senior Medical Officer, was also available night and day.

A special expression of thanks is due also to the Medical Superintendents and staffs of the Council's Hospitals, both general and mental, who with depleted numbers and a largely increased burden of work and responsibility carried on during the anxious years of war and the hardly less harassing time since the war ended.

The Registrar-General's estimate of the population of the Administrative County at mid-year 1945 was 1,165,080, an increase of 24,010 over the comparable estimate at mid-year 1944 and a decrease of 42,620 from the figure for mid-year 1939. The natural increase in the population (i.e. the excess of births over deaths) was 5,893 ; this figure compares with 6,803 and 7,299 in 1944 and 1943 respectively.

The number of live births has decreased from 20,377 in 1944 to 18,676 in 1945, and the birth rate also decreased from 17.86 in 1944 to 16.03. The birth rate for England and Wales was 16.1.

The number of deaths and the crude death rate were 12,783 and 10.97 per thousand population respectively, as compared with the corresponding figures for 1944 of 13,574 and 11.90 respectively.

The four main causes of death are Heart Disease, Cancer, Respiratory Disease (non-tuberculous) and Tuberculosis. The deaths due to Heart Disease have decreased from 1,391 (or 1.22 per 1,000) to 1,334 (or 1.14 per 1,000). The deaths due to Cancer have decreased from 2,251 (or 1.97 per 1,000) to 2,226 (or 1.91 per 1,000) ; this is only the second time since 1933 that the deaths from cancer have not shown an increase over the previous year ; in this connection it must be pointed out that a substantial proportion of cancer cases are curable if diagnosed and treated early. The deaths from non-tuberculous Respiratory Diseases have declined from 3,459 (or 3.03 per 1,000) to 3,404 (or 2.92 per 1,000). Deaths due to Tuberculosis (both pulmonary and non-pulmonary) increased slightly from 549 (or 0.49 per 1,000) in 1944 to 576 (or 0.49 per 1,000) in 1945.

The number of deaths of infants under one year was 636 and the infant mortality rate was 34.05 ; this is the lowest rate ever recorded in the County ; the number of deaths and the rate for the previous year were 752 and 36.90 respectively. By far the highest proportion of these deaths occur in the first four weeks of life and are due to congenital debility and malformation (including premature birth). The maternal mortality rate was 1.00 per 1,000 births, compared with 1.63 for the previous year, the lowest rate ever recorded in Surrey and a truly remarkable figure. The rate for England and Wales as a whole was 1.79 per 1,000 births. Of the total of 19 maternal deaths in the County, 5 were due to puerperal and post-abortion sepsis.

The number of expectant mothers who attended the ante-natal clinics held outside the hospitals under the Council's Maternity and Child Welfare Scheme was 4,418, an increase of 208 over the previous year. Some 7,000 expectant mothers attended the ante-natal clinics held in the Council's hospitals. The total number of ante-natal attendances in both sets of clinics was 50,505, compared with 49,706 in 1944. The steady increase of the past few years in the number of maternity cases admitted to County Hospitals has continued and is likely to continue ; 7,134 cases were admitted during the year. In addition to these 7,134 cases admitted to the County Hospitals, 620 cases were admitted to Maternity Homes and Hospitals under the Council's Maternity and Child Welfare Scheme and 2,221 were admitted to the Emergency Maternity Homes administered by the County Council under the Government Evacuation Scheme. Thus, excluding the cases under the Government Evacuation Scheme who do not belong to Surrey, 41.5 per cent. of all the births in Surrey took place under the County Council's Schemes.

The number of patients admitted to County Hospitals during the year was 44,787 as compared with 56,109 in 1944. The total number of such beds available in December 1945 was 3,798 as compared with 5,108 in December 1944. The number of admissions to Botleys Park dropped from 20,169 in 1944 to 5,882 in 1945, due principally to its ceasing to be a " Transit " Hospital for casualties from the front line.

The death rate from pulmonary tuberculosis was 0.42, i.e. the same as for the previous year. The number of new notifications and the case rate both decreased, from 1,218 and 1.07 per thousand of the population to 1,117 and 0.96 respectively. For non-pulmonary tuberculosis the corresponding figures were 261 and 0.23 per thousand in 1944 and 213 and 0.18 per thousand in 1945.

The total attendances at the Chest Clinics during the year were 25,509, as compared with 23,429 in 1944; and the number of new cases diagnosed as tuberculous at the dispensaries was 1,461 (including 129 contacts diagnosed as tuberculous), as compared with 1,368 in 1944.

I would draw attention to the first detailed report on the working of the X-ray plant for Mass Radiography, which was acquired by the County Council towards the end of 1944. The total number of persons examined up to 31st December, 1945, was 28,218, comprising 15,586 males and 12,632 females. Omitting 36 previously known cases, a total of 750 new cases of Tuberculosis were discovered, of whom 549 were inactive and required no further action, and 201 were active cases of pulmonary tuberculosis, being 0.71 per cent. of the total number of persons examined.

In the report for the year 1944 mention was made of the serious difficulties which had and were being experienced owing to the shortage of beds for pulmonary tuberculosis; this position has become increasingly serious in spite of all the efforts made. The grave shortage of both domestic and nursing staff is imperilling or even denying to patients the chance of treatment and recovery, and first-class accommodation has actually had to be closed notwithstanding a long waiting list of patients. The shortage of staff both nursing and domestic, is equally serious in all the Council's hospitals, both general and mental.

The course of Venereal Disease in Surrey is shown in the interesting table on page 35.

The number of new licences granted for the production of Tuberculin Tested milk continues to increase and at the 31st December, 1945, 170 licences were in force. This number compares with 139 at the end of the previous year and 91 on the 31st December, 1939. Considerable progress has been made in the improvement of the buildings, equipment and methods used in the production of both Tuberculin Tested and Accredited Milks.

Finally, as this is my last Annual Report I must place on record my gratitude to the members of the County Council for the consideration, courtesy and kindness which they have always shown me during my term of office. I have been proud to serve the Surrey County Council and I have been very happy in my service.

In my own staff, both senior and junior, I have been more than fortunate; from them, both permanent and temporary, in the turmoil and anxiety of the war years and in the calmer years of peace, I have received the most loyal, friendly and willing co-operation and support, and no words are too strong to express my gratitude to them.

I have the honour to be, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

J. FERGUSON,
County Medical Officer.

STATISTICS AND SOCIAL CONDITIONS.

Area.

The area of the Administrative County has not altered for many years and is 449,160 acres.

Population.

The population of the Administrative County at the 1931 Census was 947,770, and the Registrar-General's estimate of the population at mid-year 1945 was 1,165,080, an increase of 217,310, or 22·9 per cent. in fourteen years. There has been considerable fluctuation in the population since the beginning of the war, as shown in the following Table, the population at mid-year 1939 being 1,207,700.

The Registrar-General's mid-year estimate of the population for the Urban and Rural areas during each of the six years 1940-1945 is shown in the following table :—

	1940.	1941.	1942.	1943.	1944.	1945.
Urban Districts... ..	1,078,870	1,044,600	1,052,600	1,045,700	1,010,100	1,036,960
Rural Districts	137,630	144,200	136,800	132,600	130,970	128,120
Administrative County	1,216,500	1,188,800	1,189,400	1,178,300	1,141,070	1,165,080
Increase or decrease over previous year ...	+8,800	-27,700	+600	-11,100	-37,230	+24,010

The rapid growth of population in the last twenty-five years (57·7 per cent.) has created many problems, apart from the problem of housing. In 1921 the population of the Administrative County was 738,618 ; at the 1931 census it was 947,770, an increase of 209,151, being an average annual increase of practically 21,000 ; in 1939, when war broke out, the population was estimated by the Registrar General to be 1,207,700, being an increase of 259,930 in eight years or an average annual increase of 32,491. During the war years many changes in the number and distribution of the population of the County took place, principally owing to evacuation and to the calling up of persons for the armed forces and other forms of national service ; some of the northern districts of the County were evacuation areas and suffered a considerable diminution of population from which they have not yet recovered.

The following table shows the population of each Sanitary District at the censuses of 1921 and 1931, and the Registrar General's mid-year estimate for 1944 and 1945 :—

DISTRICTS.					Area in Acres.	Census Population.		Registrar-General's Estimates of Mid-year populations.	
						1921.	1931.	1944.	1945.
Urban.									
1.	Banstead	...	...	...	12,821	12,468	18,734	27,450	27,690
2.	Barnes (M.B.)	...	...	...	2,519	34,299	42,440	32,990	34,670
3.	Beddington and Wallington (M.B.)	...	...	...	3,045	16,451	26,328	26,690	27,900
4.	Carshalton	...	...	...	3,346	13,873	28,586	52,300	54,230
5.	Caterham and Warlingham	...	...	...	8,233	17,108	21,774	22,440	24,110
6.	Chertsey	...	...	...	9,983	14,939	16,988	28,500	27,520
7.	Coulsdon and Purley	...	...	...	11,142	23,115	39,795	50,240	53,460
8.	Dorking	...	...	...	9,511	13,207	15,204	18,600	18,920
9.	Egham	...	...	...	9,350	14,496	17,196	21,580	21,360
10.	Epsom and Ewell (M.B.)	...	...	...	8,427	22,953	35,231	60,270	62,830
11.	Esher	...	...	...	14,847	27,540	32,407	43,200	44,060
12.	Farnham	...	...	...	9,039	17,360	19,005	22,760	22,430
13.	Frimley and Camberley	...	...	...	7,766	13,676	16,532	16,230	16,190
14.	Godalming (M.B.)	...	...	...	2,393	10,856	10,940	14,680	14,020
15.	Guildford (M.B.)	...	...	...	7,184	27,734	34,237	45,310	44,740
16.	Haslemere...	...	...	...	5,751	8,195	9,168	11,780	11,140
17.	Kingston-on-Thames (M.B.)	...	...	...	1,408	39,514	39,825	34,780	35,760
18.	Leatherhead	...	...	...	11,187	11,233	16,483	23,870	23,700
19.	Malden and Coombe (M.B.)	...	...	...	3,164	14,495	23,350	35,480	38,090
20.	Merton and Morden	...	...	...	3,237	17,532	41,227	62,760	66,050
21.	Mitcham (M.B.)	...	...	...	2,932	35,122	56,872	51,490	54,070
22.	Reigate (M.B.)	...	...	...	10,255	31,733	34,547	36,360	36,670
23.	Richmond (M.B.)...	...	...	...	4,109	37,105	39,276	32,560	34,160
24.	Surbiton (M.B.)	...	...	...	4,709	20,149	30,178	49,330	50,660
25.	Sutton and Cheam (M.B.)	...	...	...	4,338	29,733	48,363	67,360	70,250
26.	Walton and Weybridge	...	...	...	9,056	21,634	25,671	33,270	33,180
27.	Wimbledon (M.B.)	...	...	...	3,212	61,405	59,515	44,800	47,070
28.	Woking	...	...	...	15,704	31,693	35,987	43,020	42,030
Total					198,668	639,618	835,859	1,010,100	1,036,960
Rural.									
1.	Bagshot	...	...	...	16,085	9,878	11,080	12,650	12,660
2.	Dorking and Horley	...	...	...	53,943	16,042	18,485	22,610	21,480
3.	Godstone	...	...	...	52,507	23,196	25,866	27,420	27,650
4.	Guildford	...	...	...	59,782	27,574	31,554	37,880	36,850
5.	Hambledon	...	...	...	68,175	22,310	24,926	30,410	29,480
Total					250,492	99,000	111,911	130,970	128,120
Administrative County					449,160	738,618	947,770	1,141,070	1,165,080

The figures given by the Registrar-General express the populations for the 1921 and 1931 Censuses as they would have appeared if the area boundaries at that time were the same as they are at present.

Rateable Value and Estimated Produce of a Penny Rate.

The rateable value of the Administrative County on the 1st April, 1945, was £13,700,336, and the estimated produce of a 1d. rate for general County purposes for the year 1945-46 was £54,269.

VITAL STATISTICS.

CHIEF VITAL STATISTICS.

In the following table the chief vital statistics of the Administrative County for 1944 and 1945 and those of the urban and rural districts of the County, are compared with those of England and Wales :—

	1944				1945			
	Urban Districts.	Rural Districts.	Adminis- trative County.	†England and Wales.	Urban Districts.	Rural Districts.	Adminis- trative County	†England and Wales.
	Net rate per 1,000 population (Mid-year 1944)				Net rate per 1,000 population (Mid-year 1945)			
Birth-rate	17.76	18.60	17.86	17.60	16.04	15.95	16.03	16.1
Death-rate	11.89	11.93	11.90	11.60	10.93	11.33	10.97	11.4
*Infant mortality-rate ...	36.23	41.87	36.90	46	33.49	38.67	34.05	46
Smallpox death-rate ...	—	—	—	—	—	—	—	—
Enteric fever death-rate ...	0.001	—	0.001	0.00	0.001	—	0.001	0.00
Measles death-rate ...	0.001	—	0.001	0.01	0.02	0.03	0.02	0.02
Scarlet fever death-rate ...	0.001	—	0.001	0.00	0.002	—	0.002	0.00
Whooping cough death-rate ...	0.03	0.02	0.03	0.03	0.005	0.02	0.006	0.02
Diphtheria death-rate ...	0.01	—	0.01	0.02	0.005	—	0.004	0.02
Influenza death-rate ...	0.09	0.12	0.09	0.12	0.07	0.07	0.07	0.08
*Diarrhoea and enteritis (under 2 years) death-rate	3.68	4.52	3.78	4.8	1.68	3.92	1.93	5.6

* Rate per 1,000 births. † Provisional figures.

The following statement compares the County birth and death rates for the year 1945 with those for the preceding five years 1940-44 and with the mean of those five years.

	Per 1000 Population				Per 1000 Births	
	Birth Rate	Death Rate	Death Rate from Pulmonary Tuberculosis.	Death Rate from Cancer.	Maternal Mortality	Deaths of Infants under 1 year.
1940	13.52	12.18	0.46	1.64	2.10	41.62
1941	13.47	11.45	0.48	1.72	2.30	44.60
1942	16.57	10.88	0.45	1.77	1.78	38.26
1943	17.34	11.15	0.43	1.85	1.43	36.70
1944	17.86	11.90	0.42	1.97	1.63	36.90
Totals	78.76	57.56	2.24	8.95	9.24	198.08
Mean of 5 years, 1940-44 ...	15.75	11.51	0.45	1.79	1.85	39.62
1945	16.03	10.97	0.42	1.91	1.00	34.05
Increase or decrease in 1945 on:—						
5 years' average	+0.28	—0.54	—0.03	+0.12	—0.85	—5.57
Previous year	—1.83	—0.93	No change	—0.06	—0.63	—2.85

Population—Registrar General's Estimate—Mid-Year 1944, 1,141,070.
Mid-Year 1945, 1,165,080.

It is worth noting that at the beginning of the present century the birth rate in Surrey was 23.9 per 1,000 population, the death rate was 12, and the infantile mortality was 103. In 1912, when the anti-tuberculosis scheme was inaugurated the death rate in Surrey from Pulmonary Tuberculosis was 0.72 per 1,000 population. Even as short a time ago as 1931 the maternal mortality rate in Surrey was 4.28 per 1,000 births, round about which figure it had obstinately remained, in common with the rest of England and Wales, for decades. Cancer, unfortunately, is an unabated scourge.

Live Births and Birth Rates.

The live births registered in or belonging to the Administrative County during the year ended 31st December, 1945, numbered 18,676, as compared with 20,377 in the previous year, showing a decrease of 1,701. Of this number 1,465, or 7.84 per cent., were illegitimate, as compared with 1,561 or 7.76 per cent., in 1944 and 692 or 4.05 per cent. in 1939; the illegitimate birth rate is approximately twice as high as it was before the war. The birth rate for the year was 16.03 as compared with 17.86 for the previous year, when the birth rate for the year was the highest recorded since 1920. The birth rate for England and Wales for 1945 was 16.1.

The number of births, the birth rate and the excess of births over deaths in each of the sanitary districts and in the Administrative County during 1945 are shown in the following table:—

DISTRICTS.	1945.		
	Number	Net rate per 1000 population (Mid-year 1945)	Excess of births over deaths
Urban.			
1. Banstead	389	14.05	127
2. Barnes (M.B.)	537	15.49	67
3. Beddington and Wallington (M.B.)	505	18.10	198
4. Carshalton	816	15.05	373
5. Caterham and Warlingham ...	444	18.42	175
6. Chertsey	440	15.99	211
7. Coulsdon and Purley	750	14.03	201
8. Dorking	284	15.01	50
9. Egham	308	14.42	81
10. Epsom and Ewell (M.B.)	819	13.04	248
11. Esher	697	15.82	210
12. Farnham	393	17.52	105
13. Frimley and Camberley	311	19.21	130
14. Godalming (M.B.)	230	16.41	60
15. Guildford (M.B.)	725	16.20	214
16. Haslemere	213	19.12	49
17. Kingston-on-Thames (M.B.) ...	593	16.58	88
18. Leatherhead	360	15.19	121
19. Malden and Coombe (M.B.) ...	637	16.72	285
20. Merton and Morden	1,027	15.55	425
21. Mitcham (M.B.)	974	18.01	423
22. Reigate (M.B.)	569	15.52	72
23. Richmond (M.B.)	560	16.39	82
24. Surbiton (M.B.)	875	17.27	339
25. Sutton and Cheam (M.B.)	1,051	14.96	304
26. Walton and Weybridge	590	17.78	212
27. Wimbledon (M.B.)	801	17.02	171
28. Woking	735	17.49	281
Total	16,633	16.04	5,302
Rural.			
1. Bagshot	203	16.03	84
2. Dorking and Horley	340	15.83	85
3. Godstone	450	16.27	128
4. Guildford	649	17.61	232
5. Hambledon	401	13.60	62
Total	2,043	15.95	591
Administrative County	18,676	16.03	5,893

Deaths and Death Rates.

(a) All Causes.

The total number of deaths registered in the Administrative County during 1945 was 12,783, as compared with 13,574 in the year 1944. The crude death rate for 1945 was 10.97 as compared with 11.90 for 1944. The death rate for England and Wales during 1945 was 11.4.

(b) Infant Mortality.

The number of deaths under one year during 1945 was 636, compared with 752 in 1944. The infant mortality rate for Surrey was 34.05, as compared with 36.90 for the year 1944. The comparable figure for England and Wales for 1945 was 46, the same as for the previous year.

The following table gives (a) the number of deaths and the crude death rate, and (b) the number of deaths under twelve months and the infant mortality rate, in each of the sanitary districts and in the Administrative County during 1945 :—

DISTRICTS.	All Causes.		Infant Mortality.		
	Number of deaths.	Crude net rate per 1,000 population (mid-year 1945)	Number of deaths.	Net rate per 1,000 births	Number of births.
Urban.					
1. Banstead	262	9.46	12	30.85	389
2. Barnes (M.B.)	470	13.56	19	35.38	537
3. Beddington and Wallington (M.B.)	307	11.00	11	21.78	505
4. Carshalton	443	8.17	19	23.28	816
5. Caterham and Warlingham	269	11.16	18	40.54	444
6. Chertsey	229	8.32	12	27.27	440
7. Coulsdon and Purley	549	10.27	24	32.00	750
8. Dorking	234	12.37	5	17.61	284
9. Egham	227	10.63	13	42.21	308
10. Epsom and Ewell (M.B.)	571	9.09	26	31.75	819
11. Esher	487	11.05	25	35.87	697
12. Farnham	288	12.84	23	58.52	393
13. Frimley and Camberley	181	11.18	6	19.29	311
14. Godalming (M.B.)	170	12.13	8	34.78	230
15. Guildford (M.B.)	511	11.42	33	45.52	725
16. Haslemere... ..	164	14.72	9	42.25	213
17. Kingston-on-Thames (M.B.)	505	14.12	26	43.84	593
18. Leatherhead	239	10.08	11	30.56	360
19. Malden and Coombe (M.B.)	352	9.24	26	40.82	637
20. Merton and Morden	602	9.11	34	33.11	1,027
21. Mitcham (M.B.)	551	10.19	31	31.83	974
22. Reigate (M.B.)	497	13.55	19	33.39	569
23. Richmond (M.B.)	478	13.99	19	33.93	560
24. Surbiton (M.B.)	536	10.58	30	34.29	875
25. Sutton and Cheam (M.B.)	747	10.63	25	23.79	1,051
26. Walton and Weybridge	378	11.39	21	35.59	590
27. Wimbledon (M.B.)	630	13.38	29	36.20	801
28. Woking	454	10.80	23	31.29	735
Total	11,331	10.93	557	33.49	16,633
Rural.					
1. Bagshot	119	9.40	4	19.70	203
2. Dorking and Horley	255	11.87	12	35.29	340
3. Godstone	322	11.65	23	51.11	450
4. Guildford	417	11.32	28	43.14	649
5. Hambledon	339	11.50	12	29.93	401
Total	1,452	11.33	79	38.67	2,043
Administrative County	12,783	10.97	636	34.05	18,676

NOTE.—It is not yet possible to give the standardised death rates. The standardised death rate is based on information supplied by the Registrar-General, and the effect of standardising the death rate is to adjust the population of a district in regard to age and sex distribution so as to make the death rate of that district truly comparable with the death rates of other districts and with the country as a whole.

The number of deaths and the death rates per 1,000 population from each of the four main causes of death in each of the sanitary districts and in the Administrative County during 1945, together with the total number of deaths from each of these diseases in the Urban and Rural areas and in the Administrative County, are shown in the following table :—

DISTRICTS.		Heart disease.		Respiratory diseases. (non-tuberculous)		Tuberculosis.				Cancer.									
								Pulmonary.		Non-Pulmonary.				Stomach and duodenum.		Breast.			
								No.	Rate per 1,000	No.	Rate per 1,000			No.	Rate per 1,000	No.	Rate per 1,000		
URBAN																			
1 Banstead	85	3.07		22	0.79	2	0.07	—	—	5	0.18	4	0.14	5	0.18	34	1.23		
2 Barnes (M.B.)	100	2.88		50	1.44	15	0.43	4	0.12	6	0.17	13	0.37	10	0.29	58	1.67		
3 Beddington and Wallington (M.B.)	91	3.26		30	1.08	16	0.57	3	0.11	5	0.18	5	0.18	3	0.11	38	1.36		
4 Carshalton	114	2.10		49	0.90	27	0.50	1	0.02	8	0.15	15	0.28	12	0.22	55	1.01		
5 Caterham and Warlingham	64	2.65		29	1.20	11	0.46	—	—	4	0.17	4	0.17	5	0.21	35	1.45		
6 Chertsey	66	2.40		23	0.84	15	0.55	1	0.04	1	0.04	5	0.18	4	0.15	27	0.98		
7 Coulsdon and Purley	164	3.07		45	0.84	16	0.30	2	0.04	6	0.11	7	0.13	11	0.21	70	1.31		
8 Dorking	56	2.96		27	1.43	11	0.58	2	0.11	3	0.16	7	0.37	5	0.26	22	1.16		
9 Egham	65	3.04		23	1.08	6	0.28	1	0.05	6	0.28	4	0.19	6	0.28	28	1.31		
10 Epsom and Ewell (M.B.)	154	2.45		57	0.91	25	0.40	4	0.06	13	0.21	8	0.13	12	0.19	82	1.31		
11 Esher... ..	137	3.11		44	1.00	19	0.43	3	0.07	7	0.16	9	0.20	7	0.16	55	1.25		
12 Farnham	74	3.30		21	0.94	8	0.36	2	0.09	4	0.18	7	0.31	2	0.09	34	1.52		
13 Frimley and Camberley	39	2.41		21	1.30	4	0.25	3	0.19	5	0.31	2	0.12	1	0.06	16	0.99		
14 Godalming (M.B.)	50	3.57		19	1.36	8	0.57	—	—	6	0.43	2	0.14	6	0.43	10	0.71		
15 Guildford (M.B.)	105	2.35		61	1.36	21	0.47	2	0.04	11	0.25	11	0.25	7	0.16	51	1.14		
16 Haslemere	31	2.78		17	1.53	4	0.36	—	—	5	0.45	3	0.27	3	0.27	21	1.89		
17 Kingston-on-Thames (M.B.)	134	3.75		51	1.43	19	0.53	7	0.20	8	0.22	12	0.34	6	0.17	53	1.48		
18 Leatherhead	60	2.53		22	0.93	8	0.34	1	0.04	2	0.08	4	0.17	5	0.21	29	1.22		
19 Malden and Coombe (M.B.)	89	2.34		38	1.00	13	0.34	4	0.11	7	0.18	9	0.24	4	0.11	49	1.29		
20 Merton and Morden	142	2.15		70	1.06	42	0.64	3	0.05	12	0.18	18	0.27	15	0.23	71	1.07		
21 Mitcham (M.B.)	121	2.24		76	1.41	32	0.59	6	0.11	10	0.18	15	0.28	8	0.15	70	1.29		
22 Reigate (M.B.)	151	4.12		36	0.98	14	0.38	1	0.03	8	0.22	19	0.52	12	0.33	56	1.53		
23 Richmond (M.B.)	111	3.25		58	1.70	10	0.29	3	0.09	5	0.15	13	0.38	12	0.35	54	1.58		
24 Surbiton (M.B.)	163	3.22		57	1.13	21	0.41	3	0.06	12	0.24	12	0.24	15	0.30	65	1.28		
25 Sutton and Cheam (M.B.)	203	2.89		81	1.15	34	0.48	7	0.10	14	0.20	18	0.26	16	0.23	105	1.49		
26 Walton and Weybridge	101	3.04		33	0.99	6	0.18	4	0.12	5	0.15	8	0.24	7	0.21	45	1.36		
27 Wimbledon (M.B.)	186	3.95		78	1.66	25	0.53	6	0.13	6	0.13	16	0.34	15	0.32	66	1.40		
28 Woking	112	2.66		59	1.40	17	0.40	2	0.05	5	0.12	5	0.12	5	0.12	52	1.24		
Total	2,968	2.86		1,197	1.15	449	0.43	75	0.07	189	0.18	255	0.25	219	0.21	1,351	1.30		
RURAL																			
1 Bagshot	37	2.92		12	0.95	2	0.16	—	—	2	0.16	2	0.16	1	0.08	16	1.26		
2 Dorking and Horley	76	3.54		26	1.21	12	0.56	3	0.14	4	0.19	8	0.37	9	0.42	16	0.74		
3 Godstone	114	4.12		31	1.12	5	0.18	3	0.11	1	0.04	7	0.25	7	0.25	24	0.87		
4 Guildford	101	2.74		33	0.90	18	0.49	2	0.05	4	0.11	10	0.27	5	0.14	56	1.52		
5 Hambledon	108	3.66		35	1.19	5	0.17	2	0.07	2	0.07	3	0.10	5	0.17	30	1.02		
Total	436	3.40		137	1.07	42	0.33	10	0.08	13	0.10	30	0.23	27	0.21	142	1.11		
Administrative County																			
1945... ..	3,404	2.92		1,334	1.14	491	0.42	85	0.07	202	0.17	285	0.24	246	0.21	1,493	1.28		
1944... ..	3,459	3.03		1,391	1.22	474	0.42	75	0.07	223	0.20	355	0.31	258	0.23	1,415	1.24		

MATERNITY AND CHILD WELFARE.

(1) STATISTICS.

The following table gives certain statistics relating to the Administrative County as a whole and to the County Council's Maternity and Child Welfare area :—

	Whole of Administrative County.	County Council's Maternity and Child Welfare Area.
Acreage	449,160	386,771
Population (1931 Census)	947,770	505,122
Registrar-General's estimated popula- tion (mid-year) 1945... ..	1,165,080	676,300
Number of live births (registered) ...	18,676	10,819
Number of illegitimate births	1,670	996
Number of still-births	400	217
Birth rate	16·03	16·00
Deaths under one year	636	372
Infant mortality rate	34·05	34·38
Notified cases of ophthalmia neonatorum	43	11
Notified cases of puerperal pyrexia ...	226	127
Maternal deaths from puerperal and post abortion sepsis	5	—
Maternal deaths from other causes ...	14	10
Maternal mortality rate (per 1,000 live and still-births)	1·00	0·91
Maternal mortality rate (per 1,000 live births)	1·02	0·92

A table showing the incidence of illegitimate births since 1914 is given below :—

Year.	No. of illegitimate births— Administrative County.	Percentage of live births.
1914	512	3.7
1915	558	4.4
1916	737	5.8
1917	747	7.3
1918	791	7.6
1919	785	7.3
1920	772	5.0
1921	614	4.8
1922	579	4.8
1923	533	4.5
1924	384	3.4
1925	499	4.4
1926	494	4.3
1927	512	4.5
1928	550	4.6
1929	586	4.7
1930	612	4.7
1931	564	4.3
1932	556	4.1
1933	545	4.2
1934	588	4.3
1935	601	4.1
1936	604	3.85
1937	639	4.00
1938	679	3.98
1939	692	4.05
1940	710	4.32
1941	1,048	6.55
1942	1,251	6.35
1943	1,420	6.95
1944	1,561	7.76
1945	1,670	8.94

It is instructive to observe the effect of the two wars on the illegitimate birth-rate.

The following table shows the incidence of still births since 1930 :—

Year.	No. of Still births	Rate per 1000 live and still births.
1930	431	31.9
1931	441	32.5
1932	449	32.3
1933	455	33.9
1934	481	33.7
1935	485	32.0
1936	516	31.9
1937	506	30.7
1938	519	29.5
1939	529	30.1
1940	482	28.5
1941	469	28.5
1942	562	27.7
1943	571	27.2
1944	512	24.5
1945	400	21.0

The gratifying decline in the still birth rate, which was 31.9 per 1000 births in 1930, to 21.0 in the year under review may be attributed to better ante-natal supervision, improved midwifery, and to the better nutrition of the mother—causes also operative in producing the lowered neo-natal mortality, i.e., the deaths of babies within the first month of life.

The following table compares the infant mortality rates and the neo-natal (i.e. first four weeks of life) mortality rates of England and Wales and of Surrey for the years 1930-1945 :—

Year.	England and Wales.			Surrey.		
	Infant Mortality.	Neo-Natal Mortality.	Mortality Rates 4 weeks to 12 months.	Infant Mortality	Neo-Natal Mortality.	Mortality Rates 4 weeks to 12 months.
1930 ...	60	31	29	41.53	22.98	18.55
1931 ...	66	32	34	43.12	24.84	18.28
1932 ...	65	32	33	46.90	24.72	22.18
1933 ...	64	32	32	42.20	24.54	17.66
1934 ...	59	31	28	43.24	24.59	18.65
1935 ...	57	30	27	40.39	23.61	16.78
1936 ...	59	30	29	41.78	24.24	17.54
1937 ...	58	30	28	41.94	23.97	17.97
1938 ...	53	28	25	37.87	21.75	16.12
1939 ...	50	28.3	21.7	37.61	24.60	13.01
1940 ...	56	29.6	26.4	41.62	24.57	17.05
1941 ...	59	29	30	44.60	26.17	18.43
1942 ...	49	27.2	21.8	38.26	23.09	15.17
1943 ...	49	25.3	23.7	36.70	22.36	14.34
1944 ...	46	24.35	21.5	36.90	22.03	14.87
1945 ...	46	24.76	21.24	34.05	22.06	11.99
Per cent. decrease 1945 compared with 1930 ...	23	20	27	18	4	35

(2) POPULATION AND NUMBER OF BIRTHS.

The Registrar-General's estimated mid-year population and the number of births registered in the County Council's Maternity and Child Welfare area during the year are shown below :—

Population.	Number of births registered.
676,300	10,819

The birth rate for the whole County has declined from 17.86 in 1944 to 16.03 for the year under review ; there was a similar reduction in the country as a whole.

(3) NOTIFICATION OF BIRTHS.

The following table shows the number of births notified under the provisions of the Public Health Act, 1936 :—

Year.	Notified by doctors and parents.		Notified by midwives.		Total.
	Live births.	Still-births.	Live births.	Still-births.	
1945	2,680	62	8,205	135	11,082

(4) CENTRES.

The County Council maintains 95 Infant Welfare Centres.

Ante-Natal Clinics are held at 29 different Centres throughout the County and in some districts ante-natal consultations take place before the Welfare sessions. Patients are also seen at ante-natal clinics held at Dorking, Epsom, Guildford (St. Luke's), Kingston, Redhill, Farnham and St. Helier County Hospitals, conducted by the specialist staff of those hospitals.

The following table gives the total attendances at the Maternity and Child Welfare and Ante-Natal Clinics (excluding the Hospital Ante-Natal Clinics) during the year 1945, with the comparative figures for 1944 :—

Year.	Total attendances.			
	Ante-Natal and Post-Natal.	Infants under one year.	Children 1—5 years.	Inclusive Total.
1944	18,262	107,015	75,875	201,152
1945	20,518	107,780	83,223	211,521

(5) ANTE-NATAL SERVICES.

The attendances at Ante-Natal Clinics, excluding the cases seen at the Hospital clinics, were as follows :—

Year.	Ante-Natal Cases.		Post-Natal Cases.	
	Total number of expectant mothers who attended Clinics.	Total attendances of expectant mothers.	Total number of mothers who attended Clinics.	Total attendances of mothers.
1945	4,418	19,378	390	751

The attendances at the Hospital ante-natal clinics are given on page 31.

(6) MATERNAL MORTALITY.

The maternal mortality rate per thousand live and still births for the County and for England and Wales for the year 1945 was :—

Surrey.			England and Wales.
Whole County.	Administrative County.	County Welfare Area.	
	1.00	0.91	1.79

Attention is drawn to the Surrey rate which is the lowest ever recorded in the County and which is a very great achievement. The number of maternal deaths in the Administrative County during 1945, together with the comparative figures for 1944 is given below :—

Year.	Puerperal and post-abortion sepsis.	Other maternal causes.	Total.
1944	10	24	34
1945	5	14	19

A table showing the maternal mortality rates for England and Wales and for Surrey in the years 1930-1945 classified under the headings of "Puerperal sepsis" and "Other causes," is given below :—

Year.	England and Wales.			Surrey.		
	P.S.	O.	T.	P.S.	O.	T.
1930	1.92	2.48	4.40	1.18	2.07	3.25
1931	1.66	2.45	4.11	1.33	2.95	4.28
1932	1.61	2.63	4.24	1.66	1.87	3.53
1933	1.79	2.63	4.42	1.19	2.31	3.50
1934	2.03	2.57	4.60	1.54	2.38	3.92
1935	1.68	2.42	4.10	1.12	2.18	3.30
1936	1.40	2.41	3.81	1.05	1.48	2.53
1937	0.97	2.26	3.23	0.49	1.88	2.37
1938	0.86	2.11	2.97	0.74	1.82	2.56
1939	0.77	2.16	2.93	0.39	1.75	2.14
1940	0.52	1.64	2.16	0.64	1.46	2.10
1941	0.48	1.75	2.23	0.53	1.77	2.30
1942	0.42	1.59	2.01	0.54	1.24	1.78
1943	0.84	1.45	2.29	0.52	0.91	1.43
1944	0.68	1.25	1.93	0.48	1.15	1.63
1945	0.57	1.22	1.79	0.26	0.74	1.00

P.S.=Puerperal sepsis. O=Other causes. T=Total.

(7) INFANT MORTALITY.

There were 636 deaths under one year registered in the Administrative County being 4.98 per cent. of the total number of deaths occurring at all ages during the year.

The infant mortality rate in the Administrative County per 1,000 registered live births was 34.05 as compared with 46 for England and Wales. This is the lowest rate ever recorded in the County.

An analysis of the causes of infant deaths is given in the following table :—

Causes of death.	Number of deaths of infants under one year.
Total (all causes)	636
Rate per thousand live births	34.05
Whooping Cough	6
Influenza	3
Cerebro-spinal fever	10
Tuberculosis of the respiratory system ...	0
Other tuberculous diseases	5
Bronchitis	14
Pneumonia (all forms)	75
Other respiratory diseases	2
Diarrhoea and enteritis	32
Other digestive disorders	13
Acute and chronic nephritis	1
Congenital debility and malformation (including premature birth)	421
Other causes	54
TOTAL	636

This table shows that 66 per cent. of all the deaths of infants under one year were due to congenital debility and malformation (including premature birth).

(8) MIDWIVES' ACTS, 1902 to 1936.

The number of State Certified Midwives who gave notice of their intention to practise midwifery during 1945 was 555 compared with 545 in 1944.

The following table gives a summary of the notifications received from midwives during the year under review :—

Notification of sending for medical aid ...	2,301
Still-births and abortions	55
Miscarriages	40
Laying-out dead body	40
Liability to be a source of infection ...	148
Notification of death	21
Artificial feeding	136
TOTAL	2,741

Special investigations undertaken during 1945 were as follows :—

Notice of sending for medical aid	204
Still-births, abortions and miscarriages	51
Liability to be a source of infection	46
Death of mother or baby	16
TOTAL	317

The births attended by midwives practising in the area during 1945 were classified as follows :—

Births at which midwife acted as midwife	9,186
Births at which midwife acted as a maternity nurse	5,420

Midwives Act, 1936—Alterations to Scheme.

During the year the appointment of an additional midwife by the Richmond Nursing Association was approved for service particularly in the Ham area. The Public Health Committee is giving attention to the securing of residences for the County Council domiciliary midwives who owing to the extreme shortage of houses cannot obtain a house and has already taken certain steps in that direction.

Gas-Air Analgesia.

The Kingston, Redhill, St. Helier and Epsom County Hospitals and the Woking Maternity Home, are approved by the Central Midwives Board as institutions for the special training of midwives in the administration of nitrous oxide and air. During the year several midwives took the Course of training and the Committee authorised the purchase of an additional number of sets of Gas and Air Analgesia apparatus for use in the Domiciliary Midwifery service by midwives who have the necessary training.

(9) PUBLIC HEALTH (OPHTHALMIA NEONATORUM) REGULATIONS, 1926 TO 1937.

The following table gives the number of notifications of inflammation of the eyes received from midwives and the number of cases of ophthalmia neonatorum notified under the Regulations by Medical Practitioners.

Year.	Number of cases in which		Case Rate, i.e., number of notified cases per 1,000 births.
	Medical Aid sought for inflammation.	Cases of Ophthalmia Neonatorum notified.	
1945	101	43	2.30

No case resulting in serious visual defect is known to have occurred in recent years.

Year.	Cases.				Results in cases occurring in the practice of Midwives.			Left County
	Notified.	Occurring in the practice of Midwives	Treated		Vision unimpaired.	Vision im- paired.	Total Blind- ness.	
			At Home	In Hospital				
1945	43	8	6	2	8	—	—	—

During the year 1945 two babies were admitted for treatment under the Council's scheme—one to St. Mary's Hospital, Carshalton and the other to St. Helier County Hospital. In each case the mother accompanied the baby.

(10) PUERPERAL PYREXIA REGULATIONS, 1939.

The following table shows the number of notifications of puerperal pyrexia received and the number of patients admitted to hospital during the year :—

Year.	Number of cases notified.		Number of patients admitted to Hospital from Maternity and Child Welfare Area.
	Whole County.	Council's Maternity and Child Welfare Area.	
1945	226	127	16

(11) MATERNITY HOMES.

The number of women resident in the County who have been admitted to Maternity Homes or Hospitals under the Council's Maternity and Child Welfare Scheme is shown in the following table :—

	1945.
Bagshot, Duchess of Connaught Memorial Nursing Home	65
Frimley and Camberley District Hospital	6
Walton-on-Thames Maternity Home ...	80
Woking Maternity Home	469
Public Health Hospitals and Public Assistance Institutions	1,338
	1,958

On page 30 of this report will be found particulars of the 7,134 maternity cases admitted to the Council's Hospitals from the whole of the County, including the 1,338 shown in the foregoing table. Thus 41.5 per cent. of all the births in Surrey in 1945 took place in beds provided by or subsidised by the County Council, 38 per cent. being in the Council's own hospitals.

(12) HOSPITAL SUPERVISION OF COMPLICATED CASES.

During the year there were 133 consultations with the Obstetric Consultants for complications of labour and 39 cases were admitted to Hospitals or Maternity Homes on their recommendation.

(13) HOME NURSING AND HOME VISITING.

The number of visits made by Health Visitors to expectant mothers and to children under five years of age is shown below :—

Year.	Expectant mothers.		Infants under 1 year.		Children 1—5 years.		Visits to Foster Children.
	Number of cases visited for first time during year.	Total visits to all cases on register	Number of cases visited for first time during year.	Total visits to all cases on register	Number of cases visited for first time during year.	Total visits to all cases on register.	
1945	3,091	4,784	10,460	37,633	1,806	54,313	7,733

(14) DENTAL TREATMENT.

In the following table a summary is given of the dental work done during the year at 28 Maternity and Child Welfare Dental Clinics, twelve of which were held jointly with the School Dental Clinics

Year.	Attendances.		Extractions.		Fillings.		No. of Administrations of General Anaesthetics.		No. of other operations including supply of Artificial Teeth.
	Mothers.	Children.	Permanent Teeth.	Temporary Teeth.	Permanent Teeth.	Temporary Teeth.	Mothers.	Children.	
1945	4,966	812	4,655	817	1,038	266	1,376		1,767

(15) PREVENTION AND TREATMENT OF CRIPPLING.

The County Council's Maternity and Child Welfare Scheme provides for the out-patient treatment of orthopaedic defects at a number of Orthopaedic Clinics and for institutional treatment at certain Orthopaedic Hospitals. Seven children were maintained in one or other of these institutions during the year, as compared with seven children during 1944.

The Orthopaedic Centres and the number of children under five years of age receiving out-patient treatment at each centre are given in the following table :—

Centre.	1945.
Camberley, Red Cross Curative Post ...	42
Croydon General Hospital	10
Farnham County Hospital	4
Farnham Curative Post	7
Guildford, Royal Surrey County Hospital	9
Kingston, Red Cross Curative Post ...	95
Merton, Nelson Hospital	24
Redhill County Hospital	11
Weybridge, Locke-King Clinic	63
Woking, Red Cross Curative Post	53
TOTAL	318

(16) INFANT LIFE PROTECTION.

At the end of the year there were 281 foster mothers and 369 foster children known to be in the Council's Maternity and Child Welfare area. During the year 7,733 visits were made by Health Visitors.

During the year the Public Health Committee and the Education Committee scrutinised in detail their schemes for the supervision and protection of children who are the responsibility of either of those committees and came to the conclusion that the schemes were being worked carefully and conscientiously, not only in safeguarding the physical well-being of the children but in promoting their happiness.

(17) WELFARE CENTRES.

The following table shows the attendances and total number of children who were in attendance at the Welfare Centres at the end of the year :—

Year.	Children under One Year.		Children One—Five Years.		Total number of children who were in attendance at end of year.		
	New Cases.	Total Attendances.	New Cases.	Total Attendances.	Children under one year of age.	Children between one and five years.	Total.
1945	7,871	107,780	2,134	83,223	5,970	16,819	22,789

(18) ADOPTION OF CHILDREN (REGULATION) ACT, 1939.

This Act came into force on the 1st June, 1943, and placed certain duties on the Council within its Maternity and Child Welfare area. Under Section 7 of the Act any person participating in the making of arrangements for the adoption and who is not the child's parent or guardian or the person with whom the child is placed, must notify the Welfare Authority of the area in which the child is to reside, of the arrangement. Such children are supervised by the Health Visitors as in the case of foster children, either until an Adoption Order made in respect of the child becomes operative or until the child reaches the age of nine years. At the end of the year 14 persons had given notice as required in respect of 23 children, and 2 children still remained under supervision.

(19) HOME HELP SCHEME.

The services of home helps were available in many parts of the Council's Welfare area to carry on the domestic duties of the home during the incapacity of the mother either before or during the lying-in period. The normal period of employment is fourteen days. Three full-time home helps and 230 occasional home helps were engaged in 379 cases during the year. The Committee is willing to extend the scheme to the fullest extent if suitable home helps could be obtained, but home helps are exceedingly difficult to find.

Domestic Helps.

During the year an order was made under the Emergency Powers (Defence) Regulations, 1939, authorising Welfare Authorities to make arrangements for the provision of domestic help to householders and to employ women to provide such help; assistance is intended for persons sick or infirm (whether through old age or otherwise) who are unable to obtain domestic help although greatly in need of it.

A scheme for the provision of domestic helps on the lines suggested by the Minister of Health was started, and two full-time and six part-time domestic helps have been employed during the year. Again, as in the case of home helps, it is difficult in the extreme to find suitable and willing women.

(20) EVACUATION.

In the Annual Reports for 1939-44 reference was made to the increase of work in the Maternity and Child Welfare Services caused by the evacuation of mothers and young children to reception areas in the County and to the establishment of Emergency Maternity Homes and Ante- and Post-Natal Hostels for the accommodation of expectant mothers evacuated under the Government Evacuation Scheme.

During the year 2,221 expectant mothers were admitted to these Emergency Maternity Homes; of these 36 were transferred elsewhere before delivery, and 2,167 were delivered in the Homes. Of the total admissions, 35 mothers were delivered by Caesarean Section, 141 by instrumental means and in 21 cases the placenta was manually removed. Labour was induced medically in 144 cases and surgically in 99 cases. There was one maternal death. Of 2,184 births, 31 (14.2 per thousand births) were stillborn, and 22 (10.08 per thousand births) died before discharge, giving a combined foetal and infant mortality rate of 24.3 per thousand births.

Most of the Nursery parties evacuated from London have remained in the County; at the end of 1945 there were 18 residential nurseries with accommodation for 551 children as compared with 21 residential nurseries with 629 places at the end of 1944.

(21) WAR-TIME DAY NURSERIES.

At the end of the year, 26 full-time and 3 part-time War-time Day Nurseries were open, with accommodation for 1,376 children.

(22) INFESTATION BY HEAD LICE.

The Health Visitors have continued their work of advising mothers on the need for scrupulous cleanliness and the best methods of cleansing the person and clothing of children found to be verminous. Their personal approach to mothers has been supplemented by the issue of leaflets and display of posters at Welfare Centres. The Health Visitors have found young children to be comparatively free from lice infestation apart from members of families with older children at school, who are verminous. Supplies of Lethane hair oil and other preparations have been made available to mothers, and fine toothed combs have been lent from the centres. Where necessary, children have been referred to cleansing stations for disinfestation of person and clothing.

(23) IMMUNISATION AGAINST DIPHTHERIA.

During the year 8,533 children under five years of age in the Council's Welfare area were immunised against diphtheria. A large part of this immunisation was carried out by the medical staff at the Welfare Centres.

During the year, Circular 193/45 was received from the Ministry of Health placing upon Welfare Authorities the responsibility for immunising children under the age of five years. Arrangements have been made to implement this instruction without disturbing satisfactory existing local facilities and with the complete co-operation of the local sanitary authorities.

The following table gives details of the number of children under the age of 5 years in the County Council's Maternity and Child Welfare area who had been immunised against diphtheria on the 31st December, 1945.

Sanitary District.	No. of children immunised.	Population 0—5 years	Per cent. immunised.
Banstead U.D.	1,187	2,040	58.2
Caterham and Warlingham U.D.	831	2,160	38.5
Chertsey U.D.	1,479	2,390	61.9
Dorking U.D.	874	1,520	57.5
Egham U.D.	845	1,770	47.7
Epsom and Ewell M.B.	2,385	4,300	55.5
Esher U.D.	2,049	3,650	56.1
Farnham U.D.	1,068	1,906	56.0
Frimley and Camberley U.D.	491	1,530	32.1
Godalming M.B.... ...	552	1,100	50.2
Haslemere U.D.	401	1,038	38.6
Leatherhead U.D.	1,054	1,880	56.1
Malden and Coombe M.B.	1,414	3,020	46.8
Surbiton M.B.	1,695	3,980	42.6
Sutton and Cheam M.B.	2,300	4,930	46.6
Walton and Weybridge U.D.	2,174	2,770	78.5
Woking U.D.	1,374	3,620	37.9
Bagshot R.D.	972	1,080	90.0
Dorking and Horley R.D.	914	1,810	50.5
Godstone R.D.	888	2,397	37.0
Guildford R.D.	1,019	3,436	29.7
Hambleton R.D.	590	2,326	25.3
	26,556	54,653	48.59

In interpreting these figures it should be remembered that it is not usual to immunise children during their first year of life.

(24) ILLEGITIMATE CHILDREN.

The Committee has continued its policy of relying mainly on voluntary homes to accommodate unmarried mothers particularly in those homes established in the County and in receipt of financial grants from the Council. During the year 1945, 21 girls were admitted to these Homes, for whom the Council accepted responsibility.

(25) CARE OF PREMATURE INFANTS.

Consideration was given to the recommendations of the Minister of Health in regard to premature infants and arrangements have since been made for implementing these recommendations as completely as possible in present circumstances, alike in respect of entry of birth weights of 5½ lbs. and under on the birth notification cards, the provision of equipment for nursing at home, and of institutional care. All the Council's hospitals have special arrangements in their maternity departments for dealing with these premature babies, including the admission of those born outside.

(26) VOLUNTARY INSPECTION OF CHILDREN UNDER FIVE YEARS OF AGE.

Some years ago the Council approved a scheme under which all the advantages of medical inspection and treatment were made available to children of pre-school age exactly as if they were children attending school. It was decided to offer routine medical inspection at every year of the child's pre-school life ; the scheme was, of course, entirely voluntary as there is no obligation on the parent of a pre-school child to submit the child to examination. The scheme has not been as successful as was hoped, but the following table gives the number of children aged 2, 3 and 4 years who were medically inspected during the year at Infant Welfare Centres, War-time Day Nurseries, and Nursery classes :—

Age Group.	No. of children inspected.		
	Boys.	Girls.	Total.
Age 2 	380	309	689
Age 3 	253	236	489
Age 4 	256	221	477
Other ages 	21	37	58
Totals 	910	803	1,713

The number of individual children found at medical inspection to require treatment, excluding uncleanliness and dental disease was 176 out of 1,713 children inspected or 10.27 per cent.

(27) NURSING HOMES.

Applications for registration received during the year numbered ten and all the applications were approved subject to compliance with certain requirements.

On the 31st December, 1945, there were 121 registered and 41 exempted Institutions and Hospitals on the register.

TUBERCULOSIS.

1. Statistics.

(a) NOTIFICATIONS.

Notification is made primarily to the Medical Officer of Health of the County District.

The summary of returns of these notifications for 1945 from the District Medical Officers of Health shows that 1,330 cases of tuberculosis were notified during the year, a decrease of 149 on the corresponding figure for 1944.

The notifications of pulmonary tuberculosis in 1945 numbered 1,117; the notifications of non-pulmonary tuberculosis numbered 213. The numbers of notifications in 1944 were 1,218 pulmonary and 261 non-pulmonary.

The case rate of pulmonary tuberculosis per thousand of the population of the county was 0.96 in 1945; the case rate in 1944 was 1.07. In non-pulmonary tuberculosis the case rate for the county was 0.18 in 1945; the figure for 1944 was 0.23.

The following table gives, for both types of tuberculosis, the statistics regarding primary notifications, case rates, total numbers of deaths and death rates for each year from 1912 to 1945 inclusive.

Year.	PULMONARY TUBERCULOSIS				OTHER FORMS OF TUBERCULOSIS.			
	Primary cases notified.	Case-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.	Primary cases notified.	Case-rate per 1,000 population.	Deaths.	Death-rate per 1,000 population.
1912	1,379	2.04	488	0.72	Not notifiable.		147	0.21
1913	1,187	1.73	477	0.69	453	0.72	162	0.23
1914	964	1.33	482	0.68	264	0.36	144	0.20
1915	941	1.42	540	0.82	203	0.30	161	0.24
1916	842	1.30	537	0.83	244	0.38	152	0.23
1917	799	1.27	605	0.96	223	0.35	171	0.27
1918	887	1.37	674	1.04	187	0.28	138	0.21
1919	787	1.14	505	0.73	121	0.17	107	0.15
1920	646	0.90	483	0.67	109	0.15	118	0.16
1921	648	0.88	449	0.61	127	0.17	109	0.14
1922	687	0.93	466	0.63	123	0.16	100	0.13
1923	668	0.91	432	0.59	152	0.21	96	0.13
1924	741	0.99	479	0.64	213	0.28	117	0.15
1925	712	0.93	470	0.62	165	0.21	90	0.12
1926	673	0.86	420	0.54	159	0.20	93	0.12
1927	711	0.89	468	0.59	181	0.23	94	0.12
1928	657	0.78	456	0.55	199	0.24	104	0.12
1929	709	0.82	487	0.57	178	0.21	101	0.12
1930	705	0.78	443	0.49	184	0.20	83	0.09
1931	802	0.85	524	0.56	194	0.21	81	0.09
1932	827	0.84	493	0.50	208	0.21	97	0.10
1933	782	0.77	560	0.55	210	0.21	86	0.09
1934	757	0.72	508	0.48	172	0.16	96	0.09
1935	719	0.66	488	0.45	186	0.17	84	0.08
1936	769	0.68	530	0.47	172	0.15	88	0.08
1937	897	0.77	528	0.45	269	0.23	80	0.07
1938	810	0.68	493	0.42	257	0.22	75	0.06
1939	833	0.69	484	0.40	230	0.19	87	0.07
1940	945	0.77	564	0.46	240	0.19	94	0.08
1941	1,049	0.88	566	0.48	280	0.24	116	0.10
1942	1,097	0.92	531	0.45	272	0.23	96	0.08
1943	1,140	0.97	506	0.43	309	0.26	96	0.08
1944	1,218	1.07	474	0.42	261	0.23	75	0.07
1945	1,117	0.96	491	0.42	213	0.18	85	0.07

The case rate per thousand population has increased by some 40 per cent. for pulmonary tuberculosis since 1938; for the non-pulmonary form there has been no material increase. The death rate, on the other hand, has most fortunately increased very little from the pre-war rate, being indeed only 0.02 per thousand population above the lowest rate ever recorded in Surrey, viz., 0.40 in 1939. No completely satisfactory explanation of the rise in incidence without a corresponding rise in the death rate—a phenomenon common to the country as a whole—has been given. The increased incidence may be due to several factors—the dispersal to their homes in the early months of the war of infectious patients in Sanatoria to make room for the vast numbers of air-raid casualties which were expected; the black-out, overcrowding and bad ventilation of shelters and homes; the pre-disposing factor of anxiety; an increasing appreciation of the importance of early diagnosis. To some extent also the increasing number of notifications is a reflection of the increased efficiency of the tuberculosis service and of an increasing recognition on the part of both practitioners and public of its value.

Apart from the new notifications during the year, 415 cases of tuberculosis in Surrey became known through death returns, posthumous notifications, transfers from other areas, etc., the transfers from other areas being about 70 per cent. of this group. This figure compares with the figure of 357 for 1944.

Each District Medical Officer keeps a register of the known cases of tuberculosis resident in his sanitary district. The numbers of cases on the district registers on the 31st December, 1945, were as follows :—

						Pulmonary.	Non-Pulmonary
Males	...	...	...	...	...	4,239	1,103
Females	...	...	...	...	...	3,442	1,225
Totals						7,681	2,328
Grand Total						10,009	

This total compares with the total of 9,443 on the district registers at the end of 1944, and of 8,710 at the end of 1943.

(b) DEATHS.

The total number of deaths from pulmonary tuberculosis during 1945 was 491 compared with 474 during 1944. The death rate per thousand of the population was 0.42, which is the same figure as in 1944. The lowest figure in any year in Surrey was 0.40 per thousand, recorded in 1939.

From non-pulmonary tuberculosis the total number of deaths was 85 or 0.07 per thousand of the population. This is the same figure as in 1944. The lowest ever recorded in Surrey was 0.06 in 1938.

The table on page 18 shows that in a period of some thirty years the death rate of pulmonary tuberculosis has been reduced in Surrey by 42 per cent. and of non-pulmonary tuberculosis by 66 per cent.—a not inconsiderable achievement in one of the four principal killing diseases, a disease, moreover, that takes its toll largely from the best years of life.

The distribution of the deaths and the death rates from tuberculosis in the various sanitary districts of the County are shown on page 8.

Owing to the small numbers of deaths the death rate in any particular district fluctuates considerably from year to year.

(c) NEW NOTIFICATIONS AND DEATHS.

The total number of new cases which became known either through formal notification or otherwise, as described above, was 1,745 in 1945. The corresponding figure for 1944 was 1,836, and for 1943 was 1,800.

Of the 576 deaths which occurred during the year 1945, 139 or 24.1 per cent., occurred in non-notified cases. The corresponding figure for the year 1944 was 145 or 26.4 per cent.

2. Dispensary Organisation.

There have been very important developments in the Dispensary organisation in the last few years with the result that the Surrey anti-tuberculosis scheme will stand comparison with any in the country. There are now seven dispensary areas, each of them in charge of a senior and highly experienced chest physician with, in the case of the busier areas, an assistant chest physician; there are 21 dispensaries. Most of the senior chest physicians have charge of beds in special blocks in the general hospital serving his district, so that diagnosis and treatment are not divorced, as is too commonly the position in the country. When building is allowed to be resumed it is the policy of the Council to provide these special blocks in all its general hospitals; the best present examples of these Chest Blocks are the two blocks, specially designed and built, each of 56 beds, in the Redhill and the St. Helier County Hospitals. In the new St. Helier Hospital there is a Tuberculosis Dispensary specially designed for the purpose and serving the adjoining areas. The chest physicians act as the consultants in all the Council's hospitals, both general and mental.

During the year the Guildford Dispensary was removed to much more commodious premises in Tower House, Epsom Road, purchased and adapted for the exclusive purpose, and situated within a few hundred yards of St. Luke's County Hospital with all its X-ray and bacteriological resources readily available. Similar new premises—Keeldar—have been acquired in Kingston (in substitution for the inadequate premises in Surbiton) and are being adapted; they are close to the Kingston County Hospital, to which it is the intention of the Council to transfer the Dispensary when the rebuilding of the Hospital, approved by the Council before the war, can be proceeded with. The new Dispensary at Barnes, which had been completed just before the war and which was requisitioned as a First Aid Post, has now returned to the purpose for which it was designed.

There are four Artificial Pneumothorax Clinics in the County in addition to the Clinic in Milford Sanatorium, which are conducted by the appropriate chest physicians.

Each of the senior chest physicians, in addition to his clerical assistance, has the whole time service of a trained almoner, who acts as a liaison between him and the Care Committees, which number some twenty.

As one of the main functions of a Tuberculosis Dispensary is diagnosis, and the earlier the better, it may be mentioned at this point of the Report that during the year under review a Mass Radiography Unit came into full operation. This Unit was one of the first four allotted out of a very limited supply by the Ministry of Health to Tuberculosis Authorities. Mass Radiography is an important advance in the detection of tuberculosis and further reference to it is made in the succeeding section of this Report.

The following tables show the work of the Dispensaries, which number 21 :—

Diagnosis.	Pulmonary.				Non-Pulmonary.				Total.				Grand Total.
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New Cases examined during the year (excluding contacts) :—													
(a) Definitely tuberculous ...	657	417	43	41	38	51	44	41	695	468	87	82	1,332
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	30	17	8	8	63
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	1,129	1,651	455	395	3,630
B.—Contacts examined during the year :													
(a) Definitely tuberculous ...	40	57	13	8	—	—	4	7	40	57	17	15	129
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	3	—	—	1	4
(c) Non-tuberculous ...	—	—	—	—	—	—	—	—	259	705	550	525	2,039
C.—Cases written off the Dispensary Register as :—													
(a) Recovered ...	25	31	8	5	6	15	13	17	31	46	21	22	120
(b) Non-tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as tuberculous) ...	—	—	—	—	—	—	—	—	1,408	2,388	1,020	928	5,744
D.—Number of Cases on Dispensary Register on December 31st :—													
(a) Definitely tuberculous ...	2,709	2,138	190	150	236	263	241	204	2,945	2,401	431	354	6,131
(b) Diagnosis not completed ...	—	—	—	—	—	—	—	—	33	17	8	9	67

1. Number of cases on Dispensary Register on January 1st ...	5,705	8. Number of visits by Tuberculosis Officers to homes (including personal consultations) ...	1,685
2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years ...	388	9. Number of visits by Nurses or Health Visitors to homes for Dispensary purposes	18,676
3. Number of cases transferred to other areas, cases not desiring further assistance under the scheme, and cases "lost sight of" ...	865	10. Number of :— (a) Specimens of sputum, etc., examined (b) X-ray examinations made in connexion with Dispensary work ...	2,080 12,743
4. Cases written off during the year as Dead (all causes) ...	363	11. Number of "Recovered" cases restored to Dispensary Register, and included in A(a) and A(b) above ...	22
5. Number of attendances at the Dispensary (including Contacts) ...	25,509	12. Number of "T.B. plus" cases on Dispensary Register on December 31st ...	2,348
6. Number of Insured Persons under Domiciliary Treatment on the 31st December ...	322		
7. Number of consultations with medical practitioners :— (a) Personal ... (b) Other... ..	402 6,116		

3. Mass Radiography.

The Mass Radiography Unit commenced working on the 27th November, 1944, at its Headquarters, St. Helier County Hospital. Owing to lack of accommodation it was not until the 14th February, 1945 that the Unit was able to deal with large numbers of persons at a time. From the 27th November, 1944, to the 31st December, 1945, 28,218 persons were examined, including 7,551 in the County Borough of Croydon, which the County Council has been glad to admit to participation in the mass radiography scheme.

GROUPS EXAMINED.

The object of the Mass Radiography Scheme is to examine by a specially designed X-ray apparatus large groups of apparently healthy persons. The groups examined and forming the material for this Report included Factory groups, Office staffs, Civil Service and Local Government employees,

National Fire Service personnel, members of the Metropolitan Police in the County of Surrey, County School children (as part of their medical examination on approaching the age of fifteen), and miscellaneous members of the general public.

Apart from working at Headquarters, the Unit was set up at the following places in Surrey :—

- (1) Messrs. Bentalls Ltd., Kingston.
- (2) British Vacuum Cleaner Company, Goblin Works, Leatherhead.
- (3) Ministry of Supply, A.F.V. Establishment, Chobham.
- (4) Kelvin Works, Hackbridge.
- (5) Hawker Aircraft Ltd., Kingston.

During the above surveys, with the kind co-operation of the managements, it has been possible to include outside groups of volunteers in addition to their own staffs. This has been most helpful in the case of smaller factories, abounding in the district, which it would be economically impracticable for the Unit to visit separately.

Other surveys were carried out at the Malden Borough Council Offices, the Old Technical Institute at Guildford and at the County Hall, Kingston. With the assistance and co-operation of the local Medical Officers of Health, many groups of volunteers were examined at these Centres including small factories, office and shop groups and Civil and Local Government Servants. At the Guildford Centre 1,246 civilian employees from Admiralty establishments at Haslemere were examined, whilst at County Hall employees of the Surrey County Council, the Boroughs of Kingston and Surbiton and the Esher Urban District Council were included.

During the year the Unit visited the County Borough of Croydon on two occasions, the two surveys occupying a period of eight weeks. On the first visit the Unit was set up at the Public Health Department, Katharine Street and 5,645 volunteers were examined. On the second occasion the Unit was set up at Messrs. Powers Accounting Machines Ltd., where, including their employees and outside groups, a further 1,856 volunteers were examined.

The Unit was also operated at its base, St. Helier County Hospital, for periods between the foregoing surveys, examining volunteers from nearby factories, Civil Servants, school children, etc. In a few instances transport was arranged to bring groups of volunteers to the Hospital from factories within reasonable distances.

PROPAGANDA AND ORGANISATION.

In order to obtain the maximum number of volunteers from a group of persons and to ensure the smooth working of a survey, it has been found necessary to devote much time and energy to the spread of information and to the careful preparation and organisation of a programme.

Normally the first contact is made with the management of the Factory or Firm applying for the services of the Unit. At this meeting it is necessary :—

- (1) to describe the Scheme in general, stressing its advantages both to employers and to employees ;
- (2) to discuss the provision of suitable premises,
 - (a) for the setting up of the Unit,
 - (b) for use as a temporary dark-room,
 - (c) for examination of patients by the Medical Director of the Unit ;
- (3) to ascertain that a suitable supply of electric power can be made available.

(The matter of premises has often proved extremely difficult, especially with regard to the dark-room accommodation. It is essential that the dark-room should be completely blacked out, should have an adequate water supply, and should be within a short distance of the Unit. It must also be large enough for the hanging of films to dry and must be completely free from dust.)

Following the meeting with the Management, the next step usually is to attend a meeting of the Works Committee (generally consisting of the shop stewards, etc.) and to explain the advantages of the Scheme to them, to answer their questions and to obtain their support.

The next stage is the spread of information amongst the employees. This is done by means of talks to the staff, either in the canteen or by means of an internal broadcast system, by showing the film "Mass Radiography," and by the issue of the Surrey County Council's leaflet describing the Scheme.

Then follows the preparation of a programme, in conjunction with a liaison officer appointed by the management, to arrange a steady flow of volunteers in order to ensure the maximum use of the apparatus.

Finally, arrangements have to be made for the transport of the Unit and its entire equipment to the premises selected, the assembly of the Unit, erection of screens, tables, office equipment, etc., connection with the electricity supply, and testing of the apparatus to ensure that everything is in working order.

In cases where volunteers are to attend for examination at centres other than at their own place of employment, the procedure is similar and experience has shown that preparations for the survey of each group, whether large or small, call for a like amount of care and energy in both propaganda and organisation.

PROCEDURE AFTER RADIOGRAPHY.

The miniature films are usually interpreted by the Medical Director the day following the visit of the volunteers to the Unit. Those with a miniature film showing some significant abnormality are recalled by letter for a full sized X-ray film. Those whose miniature films are satisfactory are notified by letter to their home address ; they are advised to keep this notification card and to produce it should they attend an X-ray Department in the future.

The examination of the full-sized X-ray films further divides the cases into (1) those who require no further action (they are notified accordingly), and (2) those whose condition requires further investigation ; the latter are given an appointment to see the Medical Officer in charge of the Unit, who is a senior Chest Physician. Only 0.8 per cent. of recalled persons failed to attend. At the clinical interview a history is taken and a clinical examination is made and any necessary tests—examination of sputum, laryngeal swab, blood sedimentation rate, Mantoux test, etc.—are performed.

Those patients with evidence of active pulmonary tuberculosis are advised as to their condition and offered the facilities of the County Council's Anti-Tuberculosis Scheme. Their private doctor is also informed (with the patient's consent) of the condition present. If the patient decides, in consultation with his own doctor, to take advantage of the County's Anti-Tuberculosis Scheme, the medical notes and X-rays are forwarded to the Chest Physician in charge of the Dispensary Area concerned. In difficult cases a consultation is arranged between the Chest Physician and the Medical Director of the Unit. Cases requiring a period in hospital for observation and investigation may be admitted direct to hospital ; in such cases the Chest Physician is kept informed of the position.

Patients who are non-tuberculous but who show evidence of other diseases, e.g. cancer, are referred to their own doctors. If further consultations are considered necessary, the facilities of the County Hospitals, either out-patient or in-patient, are offered. Non-tuberculous pulmonary conditions requiring further investigation are admitted to the Chest investigation beds at St. Helier Hospital.

By close co-operation with the other Chest Physicians and with the staffs of the County Hospitals, it has been possible to keep in touch with patients and to follow their progress.

Five persons refused further action ; three of these gave their consent to their own doctor being informed ; two refused even to allow this. No information, of course, concerning any examinee is given to anyone without the examinee's consent.

RESULTS.

A total of 28,218 persons have been examined up to 31st December, 1945. Of these 15,586 were males and 12,632 were females. These are set out in age groups in Table I. The age groups used are those required by the Ministry of Health for statistical purposes. The greater number of males examined were in the older age groups 35-59, while the majority of females were in the age groups 15-34.

Table I.

Age	14	15—24	25—34	35—44	45—59	60 and over	Total all ages
Males	443	3,051	3,231	4,716	3,439	706	15,586
Females	205	5,025	3,290	2,509	1,515	88	12,632
Total	648	8,076	6,521	7,225	4,954	794	28,218

Number recalled for full-sized X-ray plate, 2,066 (7 per cent. of the total examined).

Number recalled for clinical examination, 831 (3 per cent. of the total examined or 40.2 per cent. of those recalled for a full-sized film).

Number failing to attend for a full-sized film, 16 (0.8 per cent. of those recalled).

Number refusing further action after full-sized film or clinical examination, 5.

Number still under observation and not yet diagnosed, 22.

ABNORMALITIES REVEALED.

(A) *Non-Tuberculous Conditions.*

(1) Abnormalities of the ribs and bony thorax	110
(2) Bronchitis and Emphysema	135
(3) Bronchiectasis	23
(4) Pneumokoniosis	13
(5) Pleural thickening	*288
(6) Intrathoracic neoplasms	13
(7) Cardiovascular lesions :—	
(a) Congenital	12
(b) Acquired	126
(8) Miscellaneous conditions	107

*Some of these were almost certainly of tuberculous origin.

(B.) Cases with Evidence of Pulmonary Tuberculosis including Healed Lesions.

1. *Previously known cases*, 36.
(Inactive, 25. Active and still attending dispensary, 11).
2. *Newly discovered cases* :—
 - (a) *Inactive lesions* requiring no further action :—
 - (i) Healed primary lesions, 313
 - (ii) Healed post primary lesions, 236

} 549.

(b) *Active lesions*, 201 (0.71 per cent. of total examined).

Of the active cases of pulmonary tuberculosis 135 or 0.48 per cent. of the total examined required dispensary observation and 66 or 0.23 per cent. were admitted to hospital or sanatorium. In 93 cases the disease was limited to one lung and in 108 cases both lungs were involved. It is of particular interest to note that 74 (37 per cent.) of these 201 active cases were free from symptoms and had no idea even on careful questioning that they were not in normal good health. These findings are set out in Table II.

Table II.

201 active cases of pulmonary tuberculosis, showing extent of the lesion, presence of or absence of symptoms and disposal.

Extent of Lesion and presence of symptoms.	Disposal.		Total.
	Dispensary Observation.	Hospital or Sanatorium.	
Unilateral			
With symptoms ...	30	20	50
Without symptoms	32	11	43
Bilateral			
With symptoms ...	50	27	77
Without symptoms	23	8	31
	135 (0.48%)	66 (0.23%)	201 (0.71%)

The figures in brackets refer to the percentage of the total number examined.

Table III.

201 active cases of pulmonary tuberculosis sub-divided into sex and age groups, with percentage of active cases found in each age group.

Age	14	15—24	25—34	35—44	45—59	60 and over	Total all ages
Males ...	1 (0.23%)	18 (0.59%)	33 (1.02%)	31 (0.66%)	45 (1.31%)	4 (0.57%)	132 (0.85%)
Females ...	2 (0.98%)	34 (0.68%)	19 (0.58%)	9 (0.36%)	5 (0.33%)	—	69 (0.55%)

OBSERVATIONS.

1. The response from employees of factory and office groups examined during the year has varied considerably, ranging from about 50 per cent. to over 90 per cent. with a probable average of about 70 per cent. The highest response would appear to come from groups where good welfare facilities already exist and where the employers have the confidence of their employees. It is felt that the response from smaller factories would have been much higher had the Unit been able to visit their premises.

2. The response from employers has decreased considerably since the cessation of hostilities and the relaxation of the Essential Works Order. At least two large factories have recently asked that arrangements should be postponed until such time as their staffing difficulties have been overcome.

3. It is considered that a great increase in propaganda will be necessary when dealing with the General Public in order to obtain volunteers in sufficient quantity to keep the Unit fully occupied.

4. In view of the small number of factories within the County employing 1,000 or more persons, the need for a fully mobile unit, operated inside the vehicle, becomes obvious. With such a unit, much time would be saved which is now lost through packing, transporting, and setting up, and the problems of accommodation and dark-room facilities would be considerably reduced. The Public Health Committee has already approved this when such a specialised vehicle becomes available.

5. The dark-room problem has been a very troublesome one and the delivery of the promised Dark-room Van is eagerly awaited. Poor dark-room accommodation at many of the centres has reduced the quality of the miniature film. Only the best quality miniature films are permissible in this work as they are the key to the whole examination.

6. It is pleasing to report that no criticism of the arrangements for the examination has been received. Many individuals and firms have expressed their appreciation of the facilities made available by the Scheme.

4. Residential Treatment.

The position as regards residential treatment for patients has become increasingly serious in spite of the greatest exertions on the part both of the Public Health Committee and of its officers. The grave shortage of both domestic and nursing staff is imperilling or even denying to patients the chance of treatment and recovery, and first-class accommodation has actually had to be closed in spite of a long waiting list of patients. The problem is national and not merely local, and, therefore, all the more difficult of solution. The general hospitals and the mental hospitals are experiencing the same grave difficulties, which are well known to the Government Departments concerned.

The waiting list at the end of the year 1945 is shown in the following table :—

	Pulmonary.			Non-pulmonary.			Total.
	Male	Female	Children	Male	Female	Children	
Milford Sanatorium	101	55	—	—	—	—	156
Other Sanatoria and Hospitals...	49	66	3	3	5	12	138
County Hospitals	54	88	6	—	—	—	148
Totals	204	209	9	3	5	12	442

Note.—This table includes a number of patients already in Hospitals and Sanatoria awaiting transfer.

The Public Health Committee has wisely taken steps to provide extra accommodation against the day when it is hoped the staffing problems will be overcome. Cumberland House, Mitcham, has been transferred from the use of the Chronic Sick to the use of the tuberculous; it provides first-class modern accommodation for 100 tuberculous patients of both sexes. Two large houses in spacious grounds and pleasant surroundings—Broom Close, Cobham, and Comeragh Court, Woking, have been purchased by the County Council and are in process of adaptation for 27 and 26 patients respectively; these will be used for convalescent and ambulant patients and will be administered under the Epsom and St. Luke's, Guildford, County Hospital Committees respectively. They will be under the medical supervision of the Chest Physicians of the areas in which they are situated.

Further, the County Council has approved the establishment of a new Sanatorium of 480 beds at Shabden Park, Chipstead and plans were in active preparation at the end of the year.

The beds in the Council's own ownership which are available, if nursing and domestic staff were also available, are as follows :—

	<i>Beds</i>
Milford Sanatorium	348
Cumberland House	100
Chest Block, St. Helier Hospital	56
Chest Block, Redhill Hospital	56
Dorking County Hospital	23
Broom Close, Cobham	27
Comeragh Court, Woking	26
Total	636

In addition to these the Council continues to make extensive use of beds in other Sanatoria for both pulmonary and non-pulmonary cases, wherever they can be obtained; it must be remembered that these Sanatoria also have similar difficulties in staffing.

Notice of the admission and discharge of all patients is sent to the District Medical Officers of Health to enable them to take all necessary steps for the prevention of the spread of infection. Private medical practitioners receive a report on the clinical condition of their patients on discharge from the sanatorium.

The following table shows the numbers and sex of all patients who received institutional treatment during 1945.

		In Institutions on Jan. 1. (1)	Admitted during the year. (2)	Discharged during the year. (3)	Died in the Institutions. (4)	In Institutions on Dec. 31. (5)
Number of doubtfully tuberculous cases admitted for observation	Adult Males ...	—	3	3	—	—
	Adult Females	—	6	5	—	1
	Children ...	—	2	2	—	—
	Total ...	—	11	10	—	1
Number of patients suffering from pulmonary tuberculosis	Adult Males ...	332	349	369	32	280
	Adult Females	296	270	302	29	235
	Children ...	33	30	40	1	22
	Total ...	661	649	711	62	537
Number of patients suffering from non-pulmonary tuberculosis	Adult Males ...	29	39	39	3	26
	Adult Females	39	35	37	—	37
	Children ...	41	59	48	1	51
	Total ...	109	133	124	4	114
Grand Total ...		770	793	845	66	652

This table should be read in conjunction with the table on page 31 in order to appreciate the full extent of treatment provided by the County Council ; it should be remembered, however, that there is an unavoidable duplication of some cases due to their admission to one hospital or sanatorium in the first instance pending transfer to another for completion of treatment.

The immediate results of treatment of tuberculous patients discharged from sanatoria or hospitals during 1945 are recorded in the following table :—

Classification on admission to the Institution	Condition at time of discharge.	Duration of Residential Treatment in the Institution.															Grand Totals	
		Under 3 months but exceeding 28 days.			3—6 months.			6—12 months.			More than 12 months.			Totals.				
		M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.		
Pulmonary Tuberculosis.	Class T.B. minus.	Quiescent	16	13	1	42	42	6	18	28	13	10	4	3	86	87	23	196
		Not quiescent	3	5	1	11	7	4	6	8	6	4	5	3	24	25	14	63
		Died in Institution ...	1	1	—	2	—	—	1	2	1	5	3	—	9	6	1	16
	Class T.B. plus, Group 1.	Quiescent	2	—	—	12	11	—	16	12	1	4	1	—	34	24	1	59
		Not quiescent	8	3	—	8	5	—	8	7	—	4	5	—	28	20	—	48
		Died in Institution ...	—	—	—	—	—	—	1	—	—	—	—	—	1	—	—	1
	Class T.B. plus, Group 2.	Quiescent	8	2	—	14	11	—	20	18	—	11	11	—	53	42	—	95
		Not quiescent	16	8	—	25	12	—	39	27	—	32	34	—	112	81	—	193
		Died in Institution ...	3	2	—	4	—	—	1	7	—	8	8	—	16	17	—	33
	Class T.B. plus, Group 3.	Quiescent	—	—	—	—	—	—	—	—	—	2	—	—	2	—	—	2
		Not quiescent	4	—	—	6	—	—	3	2	—	4	8	—	17	10	—	27
		Died in Institution ...	1	1	—	—	—	—	1	3	—	1	1	—	3	5	—	8
Non-Pulmonary Tuberculosis.	Bones and Joints.	Quiescent	—	1	4	1	1	—	6	3	4	5	9	5	12	14	13	39
		Not quiescent	1	1	—	4	—	—	2	2	—	1	2	2	8	5	2	15
		Died in Institution ...	1	—	—	—	—	1	1	—	—	—	—	—	2	—	1	3
	Abdominal.	Quiescent	—	1	—	1	1	—	1	3	4	—	2	1	2	7	5	14
		Not quiescent	1	1	—	1	—	—	—	—	1	—	—	—	2	1	1	4
		Died in Institution ...	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
	Other Organs.	Quiescent	—	1	—	1	—	2	1	—	—	1	1	—	3	2	2	7
		Not quiescent	1	—	—	1	1	—	—	—	—	1	1	—	3	2	—	5
		Died in Institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Peripheral Glands.	Quiescent	—	—	2	1	—	6	—	1	6	—	1	6	1	2	20	23
		Not quiescent	—	1	—	—	1	—	—	—	—	—	—	—	—	2	—	2
		Died in Institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

5. Care Organisations.

(a) OCCUPATIONAL THERAPY.

In addition to the occupational therapy which is part of the ordinary routine at Milford Sanatorium the County Council has a scheme of occupation therapy for tuberculous persons either in their own homes, or in classes held in certain centres, or in the chest blocks of certain of the Council's general hospitals. The scheme has been in operation for several years, originally instituted by the voluntary Standing Conference of Surrey Care Committees, but since largely taken over and extended by the Council. Classes are held in Mitcham, Redhill, Guildford and Surbiton; patients are instructed in their own homes mainly—owing to petrol restrictions—by postal courses. In addition, instruction is given regularly to the patients in Cumberland House and in the Chest Blocks of St. Helier, Redhill and Dorking County Hospitals.

The present staff consists of three peripatetic occupational therapists and the work continues to grow with the increasing appreciation of its usefulness. The scheme is administered direct by the Standing Conference. The amount spent on materials during the financial year 1945-46 was £2,646.

An interesting development in occupational therapy in the Milford Sanatorium took place during the year.

The Standing Conference of Surrey Tuberculosis Care Committees introduced the British Red Cross Picture Library Scheme to the County Sanatorium in January, 1945. The purpose of this scheme was to create an interest in Art and from there to encourage drawing and painting in the Sanatorium. Members of the British Red Cross have continued throughout the year to visit almost once a week taking prints of works of art to the patients and encouraging discussion. Patients are allowed to select prints to be hung on the walls of the cubicles for as long as they wish to have them. Books on art subjects are also circulated. A keen interest has developed and artists of note give instruction in drawing and painting. Exhibitions of the patients' work have been held both in the Sanatorium and in the County Hall, and an inter-sanatorium competition for the best work was arranged. The scheme is of considerable therapeutic value.

The expenses of the artists and Red Cross visitors were met by the Standing Conference of Surrey Tuberculosis Care Committees, the Council being responsible for the cost of drawing and painting materials. The County Sanatorium was one of the first in the country to establish such a scheme and it is hoped that it may be further developed during 1946.

(b) CARE OF THE TUBERCULOUS.

TREATMENT ALLOWANCES.

During 1945, the third year since the inauguration of the Ministry of Health scheme for the provision of allowances to persons who have given up work to undergo treatment for pulmonary tuberculosis, 25,107 payments were made amounting to £36,811 3s. 9d. an increase of some £3,954 on the expenditure for the previous year. The classification of these payments was as follows :—

	£	s.	d.
(a) Maintenance Allowances	34,186	10	10
(b) Discretionary Allowances	1,795	8	5
(c) Special Payments (excluding fares)	829	4	6

The average number of persons on the weekly pay roll increased from 421 in 1944 to 484 in 1945. The average amount paid each week was £707 18s. 0d. made up as follows :—

	£	s.	d.
(a) Maintenance Allowances	653	1	1
(b) Discretionary Allowances	34	7	5
(c) Special Payments (excluding fares)	15	18	5

122 patients were granted fares to enable their relatives to visit them in hospital or sanatorium.

BOARDING OUT OF CHILD CONTACTS.

This scheme provides for the boarding out of children away from their own home in cases where the patient is unable to make adequate arrangements for the care of the children while he or she is undergoing treatment, or where the home conditions are such that the children are considered to be in danger of infection from tuberculosis.

85 children were boarded out during the year. During the last six months of the year the figures showed an increase as a result of the cessation of the Government Evacuation Scheme. The children were placed mainly with foster mothers so that they would continue to live a normal family life although children's institutions were used for difficult cases or where the parents so desired.

The cost of the scheme was as follows :—

	£	s.	d.
(a) Maintenance... ..	1,782	13	3
(b) Clothing	79	12	3
(c) Fares	7	12	4
(d) Medical attention	15	0	
Total ...	£1,870	12	10

CARE ALMONERS.

The establishment of one Tuberculosis Care Organiser and six Care Almoners was increased by one Care Almoner during the year when it became apparent that the departments built up by the Care Almoners since their appointment in September, 1943, were dealing with a bulk of work considerably greater than that originally anticipated. The new almoner's duties entail the care of patients in the County Sanatorium at Milford and the chest blocks in St. Helier and Cumberland House Hospitals.

The work done by the Care Almoners in connection with rehabilitation, as referred to in the Annual Report for 1944, has continued. To ensure that patients worked under conditions recommended and approved by the Chest Physicians, close liaison was maintained with the officers of the Ministry of Labour and with other statutory and voluntary bodies connected with the rehabilitation of the disabled. The value of personal contact with employers, factory welfare workers, shop stewards, etc., was established.

Statistical evidence cannot be obtained to show the amount of work done to provide the patients with the will and the means to carry out treatment, entailing selection of the appropriate type of assistance from the mass of statutory and voluntary schemes in existence. However, some concrete evidence of the amount of care work done is shown in the following report on the Standing Conference of Surrey Tuberculosis Care Committees and the twenty district Care Committees whose work it co-ordinates.

CARE COMMITTEES.

The Standing Conference of Surrey Tuberculosis Care Committees consists of representatives of the Public Health Committee of the County Council, of the twenty district Care Committees and the County Medical Officer; the Tuberculosis Care Organiser acts as its Secretary. During the year it received £600 in grants from the County Council.

£85 was spent on providing country holidays to build up the resistance of children who had been in contact with tuberculosis. Fewer children than usual were sent away owing to the difficulty of obtaining suitable hostesses during the transition period from war to peace.

During the year the Committee initiated the scheme, already described on a previous page, for the study of Art in the County Sanatorium as a means of enriching the lives of the patients.

The twenty district Care Committees which work closely with the staff of the Chest Clinics, can appoint the Care Almoners to act as honorary secretaries if they so wish. By the end of 1945, eight Care Almoners were acting in that capacity at the invitation of the appropriate Committee.

The total expenditure of the Care Committees for 1945 was approximately £8,461 made up as follows :—

Milk.	Bedding.	Clothing.	Fares and pocket money to in-patients.	Domestic Help, Training Schemes, Debts, etc.	Administrative Expenses.
£6,013	£425	£288	£1,151	£349	£215

Of the total income of the Committees amounting to some £8,170, £4,752 was raised by voluntary effort, £2,288 was granted by the County Council during 1945, and £1,130 was received by various Care Committees in the form of grants from the Standing Conference.

During the year the Public Health Committee decided to make itself responsible for the provision of milk and as from the 1st April, 1946, every tuberculous patient who is recommended by the Tuberculosis Officers for a supply of milk will have the milk provided, through the machinery of the Care Committees, but at the direct expense of the County Council. The milk will be supplied free or at reduced cost according to a scale of income approved by the Council. It is estimated that this new milk scheme will cost some £13,000 a year, and that the transfer of expenditure on milk from the Care Committees will enable them greatly to extend their other beneficial activities.

HOSPITAL SERVICE.

The year 1945 has been a notable one in the history of the Surrey Hospital service and the Council has carried still further its policy of providing a service that shall be up to the highest level of modern hospital practice. It is true that none of the extensive plans of rebuilding already approved by the Council before the war has been commenced and it is probable that none of these plans will be sanctioned by the Government for actual commencement until the grave housing shortage has been overcome, but much has been done by relatively minor adaptations to provide modern facilities e.g. the provision of out-patient departments at Farnham County Hospital, and at St. Luke's Hospital, Guildford; the provision of pathology departments at Milford Sanatorium and St. Luke's Hospital, Guildford, and the taking over as a Surrey County Service of the E.M.S. Pathology Department in Kingston County Hospital; and the further development of the already extensive physiotherapy department at St. Helier Hospital. But the greatest and most far-reaching of all the developments

has been the final departure from the old municipal hospital conception of medical and other staffing and the approval by the Council of a policy under which every patient will be under the care of a specialist officer of the highest professional standing. Further reference to this will be made in the section on "Staff." The Council may well be proud of (and the patients grateful for) the staff which its new policy is already attracting to its service.

During the year two Reports of outstanding importance have been published, the "Survey of the Hospital Services of London and the Surrounding Area," made on behalf of the Ministry of Health by Drs. Gray and Topping, and the "Plan" of the Surrey Hospitals Divisional Council. Without going into detail it may be said in general terms that these two Reports are in broad agreement with each other and that both recommend the development policy which has already been approved by the Public Health Committee of the County Council. The Gray-Topping Report under the heading "General Conclusions" states: "The principal need in Surrey is for a development of consultative out-patient facilities by the appointment of specialist staff. In-patient accommodation is also deficient in some areas. Both these needs would no doubt have been largely met by now if the war had not intervened to check the excellent progress being made by the County Council."

BEDS.

The number of hospital beds available on the 31st December, 1944 and 1945 respectively is given, together with the comparable numbers for 1938, the last full year before the war.

Hospitals	1938	1944 Including Reserve Beds	1945
Surrey County Council General Hospitals ...	2,435	5,108	3,798
Voluntary Hospitals	1,459	2,336	2,388
Isolation Hospitals	924	702	709
Mental Hospitals (normal)	3,373	2,669	2,669
Mental Deficiency Institutions (normal) ...	1,482	947	1,179
TOTALS	9,673	11,762	10,743

The reduction of 1,020 beds as between 1944 and 1945 is due mainly to the fact that reserve beds for the Emergency Hospital Scheme of the Ministry of Health are no longer taken into account, and also to the fact that during 1945 the Woking War Hospital was closed (and returned to its pre-war use as the Southern Railway Servants' Orphanage), and to the return of certain of the villas at Botleys Park War Hospital to the Colony for Mental Deficiency purposes.

I. County Hospitals.

(i) BEDS AVAILABLE AND OCCUPIED.

The total number of beds available in the hospitals for general purposes on 31st December, 1945, was 3,798 as compared with 5,108 on the same date in the previous year. The accommodation in each hospital on the 31st December in each year, together with the number of beds occupied, is given below :—

Hospital	December, 1944		December, 1945	
	Available (inc. Res. beds)	Occupied	Available	Occupied
Botleys Park War Hospital	942	576	522	421
Dorking (including Pixham End)	277	220	191	185
Epsom (including Ewell Park)	456	301	428	388
Farnham... ..	265	186	210	178
Guildford (St. Luke's)	627	393	510	420
Kingston Hospital (including Surbiton Annexe and Warren House)	506	346	387	365
Kingston Institution	99	49	99	91
Mitcham (Cumberland House)	112	61	99	85
Rodhill (Hospital)	554	431	471	397
Redhill (St. Anne's)	70	60	70	67
Richmond Institution	204	158	204	192
St. Helier	639	476	553	548
Shabden Park	77	57	54	47
Woking War	280	153	—	—
TOTALS	5,108	3,467	3,798	3,394

Reference has already been made to the fact that during 1945 the Woking War Hospital (200 beds) was closed and that some 300 beds in certain of the villas at Botleys Park reverted to their original purpose, namely for Mental Deficiency patients, and also to the fact that some 800 beds held in reserve for the Emergency Hospital Scheme were dispensed with. During the year Warren House (75 beds) Kingston, which was administered in association with Kingston County Hospital, ceased to be available. This large mansion was most generously placed at the disposal of the County for war hospital purposes by its owner, Lady Paget, who herself worked unceasingly and devotedly in the hospital all through the war and to whom the gratitude of the Council has been deservedly tendered by the Chairman of the Council. During 1945 also Cumberland House, Mitcham, was used mainly for Tuberculous patients as a temporary measure in order to assist in remedying the urgent need of accommodation for this type of case. During the year, the County Council acquired Broome Close, Cobham (27 beds) and Comeragh Court, Woking (26 beds) as further accommodation for Tuberculous patients, but these mansions will not be ready for the reception of patients until 1946. Further accommodation which could have been made available at St. Helier County Hospital after the completion of the war damage repairs could not be used owing to shortage of nursing and domestic staff.

During the year the Council decided to take over as one of its own general hospitals the Botleys Park War Hospital, which it had previously administered as an E.M.S. Hospital. This hospital will be so used temporarily, though probably for a considerable number of years, pending the erection of the new general hospital in Woking, which is contemplated by the County Council itself as well as by the Report of the London Survey and the "Plan" of the Surrey Hospitals Divisional Council.

The Council has also acquired Tangley Place, a beautiful and commodious house in its own large grounds near Guildford, to be administered by the St. Luke's Hospital Committee as a convalescent home for children from county hospitals. It will accommodate 36 patients.

The number of patients in hospital on 31st December, 1945 was 3,394 as compared with 3,467 on the same date in 1944. As the total number of beds available at the end of 1945 was reduced to 3,798, it will be noted that about 91 per cent. of the beds available were in average occupation by patients, which is a very high percentage for general hospitals. The demand for hospital accommodation, including maternity accommodation, was also very high during 1945, and the Medical Superintendents of the County Hospitals had to use discretion in selecting the cases for admission, having regard to the seriousness of the illness and to home conditions. Many cases had to be refused admission who would normally be willingly accepted, either because there were no beds available or even more heartrendingly, because there was insufficient nursing and domestic staff to deal with them. This position was accentuated during 1945, as some 300 patients were returned to Surrey County Council hospitals from Scotland and Wales where they had been evacuated in August, 1944.

The number of E.M.S. patients in County Hospitals on 31st December, 1945, included in the total of 3,394 patients, was 643 as compared with the figure of 952 in December, 1944. It is interesting to note that there were 2,751 Surrey Civilian patients in County Hospitals in December, 1945, as compared with 2,079 Surrey Civilian patients in 1938. In addition, The Lodge, Effingham, a hospital of 50 beds for the admission of sane epileptic women was fully occupied during 1945.

(ii) DETAILS OF WORK DONE.

In-Patient Treatment.

1945.	Botleys Park.	Cumberland House	Dorking	Effingham, The Lodge	Epsom	Farnham	Guildford, St. Luke's	Kingston	Kingston C.R.I.	Redhill	Redhill, St. Anne's Institution	Richmond, Grove Road Institution	St. Helier	Shabden Park	Woking War	Totals
1. Total No. of admissions ...	5,882	171	2,335	10	5,243	2,006	4,928	7,323	213	5,524	439	701	8,728	11	1,273	44,787
2. Total No. of deaths...	62	31	174	—	425	254	447	562	87	348	61	158	505	13	65	3,192
3. Total No. of discharges ...	5,945	116	2,189	10	4,746	1,761	4,459	6,767	78	5,191	423	515	8,144	12	1,340	41,696
4. Average duration of stay of patients included in 2 and 3 above :—																
(a) Under four weeks ...	3,342	24	1,859	3	4,304	1,561	3,988	6,272	65	4,120	163	491	7,380	—	981	34,553
(b) Four weeks and under thirteen ...	2,041	48	383	1	723	337	780	888	51	1,148	150	92	942	—	352	7,936
(c) Thirteen weeks or more ...	624	75	121	6	144	117	138	169	49	271	171	90	327	25	72	2,399
5. No. of surgical operations ...	2,891	—	462	—	2,109	826	963	2,507	—	4,827	—	—	4,326	—	701	19,612
6. No. of maternity beds ...	—	—	25	—	57	8	67	60	—	44	—	11	88	—	—	360
7. No. of maternity cases admitted (included in 1 above) ...	—	—	399	—	1,247	220	964	1,459	—	886	—	164	1,795	—	—	7,134
8. No. of live births (included in 1 above) ...	—	—	345	—	1,055	212	773	1,191	—	865	—	164	1,307	—	—	5,912
9. No. of cases notified as :—																
Puerperal fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal pyrexia ...	—	—	—	—	20	8	7	22	—	10	—	1	18	—	—	86
10. No. of maternal deaths (included in 2 above) ...	—	—	—	—	2	—	3	4	—	—	—	—	—	—	—	9
11. No. of foetal deaths :—																
(a) Stillborn ...	—	—	9	—	24	8	24	43	—	23	—	3	32	—	—	166
(b) Within 10 days of birth (included in 2 above) ...	—	—	8	—	23	11	18	36	—	23	—	3	35	—	—	157

These figures include patients admitted under the Emergency Hospital Scheme as well as Surrey Civilian sick.

The total admissions for the year 1945 were 44,787 as compared with 59,609 in 1944. The large reduction was due mainly to the loss of beds at Botleys Park War Hospital by the return of certain villas to the Colony and to the fact that although the hospital still received war casualties for treatment during 1945, it ceased to be used as a "Transit" hospital for wounded servicemen as it was used in 1944. Although the number of beds at the Kingston and St. Helier Hospitals remained unchanged during 1945, the admissions were up by 800 and 1,100 respectively, which show how great is the pressure on those hospitals for the admission of patients.

The total admissions in 1938 were 19,073 as compared with the total of 44,787 in 1945. It will be seen, therefore, that the number of admissions in 1945 were about 235 per cent. of the number of admissions in 1938 whereas the accommodation in 1945 was roughly 60 per cent. more than the accommodation available in 1938. It may be pointed out that of all the patients who left hospital by death or discharge only 5.3 per cent. had been in hospital thirteen weeks or over.

The number of maternity cases admitted in 1945 (included in the total admissions) was 7,134, which showed a small increase of 77 compared with 1944, although the number of beds available remained unchanged.

There was a large increase of approximately 4,000 in the number of surgical operations performed, the figure being 19,612. Again it is interesting to note that only 2,941 operations were undertaken in 1938 in the Council's hospitals, which is less than the increase in the single year 1945 referred to above.

An increased number of Surrey Civilian patients were also transferred or admitted directly for specialised treatment to hospitals and convalescent homes not belonging to the Surrey County Council. In 1945, 307 patients received specialised treatment in outside hospitals and 994 patients were transferred to convalescent homes and the period of treatment or convalescence corresponded to an average of 38 patients receiving special treatment and 31 patients receiving convalescent treatment throughout the year.

Tuberculosis.

Particulars of the cases dealt with in County Hospitals (excluding Milford Sanatorium) during 1945 are given below :—

		In Institutions on January 1st.	Admitted during the Year.	Discharged during the Year.	Died in the Institution.	In Institution on December 31st.
		(1)	(2)	(3)	(4)	(5)
Number of patients suffering from pulmonary tuberculosis admitted for treatment	Adult Males ...	84	317	183	105	113
	Adult Females	70	307	213	52	112
	Children ...	18	77	64	6	25
	TOTALS ...	172	701	460	163	250
Number of patients suffering from non-pulmonary tuber- culosis admitted for treat- ment.	Adult Males ...	5	36	33	6	2
	Adult Females ...	9	45	35	11	8
	Children ...	7	62	54	11	4
	TOTALS ...	21	143	122	28	14
GRAND TOTAL ...		193	844	582	191	264

The total number of patients in County Hospitals (excluding Milford Sanatorium) on 31st December, 1945 was 264 as compared with 193 on the same date in 1944, the increase being due to the fact that Cumberland House, Mitcham, in 1945 mainly admitted cases of tuberculosis instead of general chronic sick as formerly. It should, however, be noted that these figures are included in the total number of admissions as given in the table at the foot of page 30.

Out-Patient Treatment and Ante-Natal Clinics.

The numbers of attendances made in 1945 as compared with 1944 are given below :—

					<i>No. of Attendances</i>	
					1944	1945
Outpatient treatment	...	...	...	...	182,960	206,764
Ante-Natal Clinics	...	...	...	...	31,991	31,127

It will be seen that although the attendances at Ante-Natal Clinics in 1945 are down as compared with 1944, the number of out-patient attendances increased considerably, this being due in a large measure to the development of the out-patient department at the St. Helier Hospital. Attention is again drawn to the fact that there were only 22,205 out-patient attendances in all County Hospitals in 1938.

(iii) NEW BUILDINGS, ADAPTATIONS, ETC.

A comparatively small amount of building work of an essential character was carried out in 1945 owing largely to the continuing shortage of labour and materials. These adaptations consisted mainly of improving ward accommodation, facilities for clinical work in the hospitals, viz., operating theatres, X-ray and out-patient departments and pathological laboratory accommodation. Several houses providing additional accommodation for resident staff at several hospitals were acquired during the year, including St. Luke's Hospital, Guildford, and Kingston County Hospital. Further equipment was also purchased in 1945 for the various hospitals.

In addition, First Aid repairs to war damage in Kingston County Hospital and St. Helier County Hospital continued during the year.

(iv) STAFF.

The whole staffing of the Council's Hospitals, including the Mental Hospitals, was under review at the end of the year ; the Council has approved the new policy, and the establishment on the new basis had received the sanction of the Council for a number of the hospitals, both general and mental ; the details of the establishment of the remaining hospitals are being worked out in the same basis as rapidly as possible (and are, in fact, complete at the time of writing this Report). The whole establishment of each hospital—medical, nursing, clerical, technical, domestic and artisan—has been or is being settled. Subject to the general responsibility of the Medical Superintendent, the business administration of each hospital has been delegated to the Clerk and Steward, and the nursing administration to the Matron, who are held responsible by the Committee for the efficient administration of their respective spheres of duty.

The general principles on which the medical staffing is being re-organised are that every patient shall be under the care of a specialist medical officer of high professional standing ; that these specialist medical officers, who may be either whole time or part time, depending on circumstances, are the heads of teams composed of the requisite assistant and junior staff ; that clinical work is regarded as equally important, and remunerated accordingly, as the administrative work of the Medical Superintendent. The same principles have been applied in the Mental Hospitals, and the Council has accepted the logical consequences of the conversion of its mental institutions from Asylums to Hospitals. Indeed the Council's policy has been to co-ordinate the work of the two sets of hospitals, the respective committees of which have the same chief medical officer—the County Medical Officer.

The Council has approved a scheme under which the general hospitals, which are approved Nurses' Training Schools, receive definite quotas of female trained mental nurses from the Council's Mental Institutions who wish to become general trained nurses. The Council has also established at its Redhill County Hospital a male nursing training school for 27 male nurses, including mental nurses, who wish to take the certificate also in general nursing.

In spite of these important steps forward, it unfortunately remains one of the chief anxieties of both the Mental Hospitals and the Public Health Committees that there is a grave shortage of both domestic and nursing staff and that in consequence wards have had to be closed and patients refused admission.

(v) CHRONIC SICK.

Much thought has been given to the problem of the Chronic Sick and the County Council has approved a scheme on the following general lines :—

(a) no patient must be regarded as " chronic " until all modern methods of investigation and treatment have been exhausted ;

(b) that treatment must include all modern methods of physiotherapy and rehabilitation ;

(c) that provision for the nursing of acute sick and chronic sick must be regarded as one complete problem and not as two separate ones ;

(d) that each general hospital should include within its curtilage enough chronic wards to ensure that each student nurse obtains from three to six months' experience in the nursing of chronic patients, which is likely to form so great a part of the nursing life work of most nurses ;

(e) that each general hospital should have a series of chronic annexes forming part of its medical and nursing scheme ; the value of the small chronic annexe for about 50 patients run under the aegis of a large general hospital has been well demonstrated by the Surbiton Annexe of the Kingston County Hospital and the Ewell Park Annexe of the Epsom County Hospital.

The Council has approved the inclusion in the estimates for each of the next three financial years of £100,000 to acquire and equip such a series of annexes.

II. Voluntary Hospitals.

The total number of beds provided in voluntary hospitals, amounted to 2,388 on the 31st December, 1945.

III. Mental Hospitals and Mental Deficiency Institutions.

The normal accommodation at Brookwood and Netherne for mental cases and at Botleys Park for mental deficiency cases at the end of 1945 in the portions of these hospitals still available for their original purposes, together with the number of patients in these hospitals on the 31st December, 1945, was as follows :—

					<i>Normal accommodation available, December, 1945</i>	<i>No. of Patients, December, 1945</i>
Brookwood	...	...	...	...	1,049	1,157
Netherne	...	...	...	...	1,620	2,014
Botleys Park	...	...	...	...	1,179	1,131

The Mental Hospitals and Institutions have had two main difficulties during the year—overcrowding and shortage of staff. The overcrowding has been great at Brookwood and alarming at Netherne ; no amelioration seems possible until the accommodation at Brookwood, taken over by the Army, amounting to 600 beds, has been restored. Botleys Park has had to refuse admissions, but the restoration to the Colony of the accommodation used as a War Hospital has already given great relief. It must be repeated however, that the grave shortage of nursing staff is the greatest single cause of anxiety for the Mental Hospitals Committee, as it is for the Public Health Committee.

The Medical Staffs of both the Brookwood and the Netherne Hospital conduct weekly Out-Patient Clinics for early mental cases at the following hospitals in the County :—

Epsom County Hospital	Royal Surrey County Hospital, Guildford
Kingston County Hospital	St. Helier County Hospital, Carshalton
Redhill County Hospital	Victoria Hospital, Woking
St. Luke's Hospital, Guildford	

These clinics have proved a great success and have been of great value : they are primarily for early cases. In addition, the Medical Superintendents of the three mental institutions act as the Mental Consultants in the Council's general hospitals, and the Mental Institutions are an integral and vital part of the Council's Hospital Service.

At the clinics within the Administrative County approximately 850 new cases were seen during 1945.

" Voluntary " and " Temporary " patients continued to be admitted to the Mental Hospitals at Brookwood and Netherne.

IV. Infectious Diseases Hospitals.

(a) Hospital Provision.

The accommodation for cases of infectious disease at the end of 1945 was 709 compared with 702 at the end of the preceding year.

(b) Smallpox.

The County Council provides 37 beds at the Isolation Hospital at Clandon which serves the County and also, by arrangement, the County Borough of Croydon.

Five cases were admitted through the special war-time arrangement with the London County Council ; three of those were found on investigation not to be suffering from Smallpox.

PUBLIC ASSISTANCE MEDICAL OUT-RELIEF.

During 1945 the average number of home visits paid per week by District Medical Officers was 615, and the average weekly number of visits paid by patients to the doctors' surgeries was 360, as compared with 554 home visits and 378 surgery visits during the previous year.

HOME NURSING.

Under the Home Nursing Scheme of the County Council, 19,981 visits were made during 1945 by district nurses of the Nursing Associations. The comparable figure for 1944 is 14,228.

INFECTIOUS DISEASES.

The following table shows the incidence of infectious disease in the County during the year 1945, giving the number of cases of each disease notified and the attack rate :—

Disease.	1945	
	Number of cases notified.	Attack-rate per 1,000 population.
Acute polio-encephalitis	4	0.003
Acute poliomyelitis	22	0.02
Cerebro-spinal fever	41	0.04
Diphtheria	270	0.23
Dysentery... ..	786	0.67
Encephalitis lethargica	3	0.003
Erysipelas... ..	200	0.17
Leprosy	1	0.001
Malaria	5	0.004
Measles	15,732	13.50
*Ophthalmia neonatorum	43	2.30
Paratyphoid fever	4	0.003
Pneumonia	561	0.48
†*Puerperal Pyrexia	226	12.10
Scarlet Fever	1,565	1.34
Tuberculosis—Pulmonary	1,117	0.96
Non-pulmonary	213	0.18
Typhoid fever	16	0.01
Typhus	1	0.001
Whooping cough	1,754	1.51

* Rate per 1000 births.

† Includes Puerperal Fever.

LABORATORY FACILITIES.

There was no change in the Laboratory facilities apart from those referred to on page 32 in connection with St. Luke's Hospital and Kingston County Hospital.

PUBLIC VACCINATION.

The following table shows the vaccinal state on 31st January, 1946, of children whose births were registered during the year ended 31st December, 1944, together with the corresponding figures for the previous year :—

	1944	1943
Successfully vaccinated	12,078	13,112
Insusceptible to vaccination	63	79
Had Smallpox	—	—
Statutory declarations of conscientious objection	4,649	5,123
Died unvaccinated	612	579
Still postponed by medical certificates	69	104
Removals to other districts	2,335	1,766
Removals to places unknown, etc.	1,005	746
Otherwise unaccounted for	969	1,073
	<u>21,780</u>	<u>22,582</u>

In the following table the numbers of children vaccinated and unvaccinated are given, and these numbers are also expressed as percentages of the total children born in 1944. A comparison is made with similar figures and percentages for the previous year :—

	Surrey.			
	Children born in 1944		Children born in 1943	
	Number.	% of total births.	Number.	% of total births.
Successfully vaccinated or insusceptible to vaccination... ..	12,141	55.74	13,191	58.41
Unvaccinated :—				
(i) Statutory declarations or deaths	5,261	24.16	5,702	25.25
(ii) Postponements, removals, etc.	4 378	20.10	3,689	16.34
Total Births	21,780	100.00	22,582	100.00

VENEREAL DISEASES.

On page 37 are given particulars of all known new cases of venereal disease among Surrey residents during 1945, whether treated in Surrey or elsewhere. The total number who attended for the first time was 3,191, an increase of 601 over the previous year. The number found to be suffering from syphilis increased from 202 to 250, from gonorrhoea from 399 to 451, and from conditions other than venereal from 1,987 to 2,490. Whereas in 1938 the percentage of new patients seeking advice from the clinics found to be suffering from conditions other than venereal was 58 per cent. of the total, this figure in 1945 was 78 per cent. It is a fair presumption that these individuals had exposed themselves to the risk of infection and it is satisfactory that so large a number should have sought medical advice for some actual or suspected departure in health from the normal; it is also testimony to the value of the work being done by the Council's two special services visitors.

The following table shows the course of venereal disease in Surrey since 1938.

Disease.	1938	1939	1940	1941	1942	1943	1944	1945
Syphilis ...	169	141	138	153	180	239	202	250
Soft chancre ...	5	4	2	5	5	3	2	—
Gonorrhoea ...	508	367	275	335	392	381	399	451
Conditions other than venereal ...	948	869	647	798	1,047	1,980	1,987	2,490

REGULATION 33B.

This Regulation made under the Emergency Powers (Defence) Acts, 1939 and 1940 continued in operation during the whole of the year. Briefly, the Regulation empowers the County Medical Officer when he has been notified by two or more persons suffering from venereal disease that they suspect the disease to have been contracted from the same person to serve upon that person a notice requiring him or her to submit to medical examination by a "special practitioner," who is usually the Medical Officer of a Special Treatment Centre.

140 notifications were received during the year, all of which related to women. Ten women were alleged to be suffering from syphilis, one from chancroid and the remainder from gonorrhoea. Two or more notifications were received in 21 cases and in every case an attempt was made to trace the individual named with a view to requiring her to submit to medical examination, and, if necessary, to treatment. 15 of the individuals were traced: one of these attended for examination voluntarily, and formal notices were served on the remainder. Of these, all but one attended Special Treatment Centres, the presence of disease was confirmed and treatment commenced. The remaining woman left the district and all efforts to trace her were unsuccessful. One of these women persistently failed to attend regularly for treatment and legal proceedings were instituted against her; the Magistrates found her guilty and sentenced her to three months imprisonment. During the year legal proceedings had to be taken in another case notified in the previous year, for failing to attend regularly for treatment, the accused was found guilty and a similar sentence imposed.

The following is an analysis of the 140 cases notified:—

Found and examined ...	...	...	...	...	...	...	...	74
Found but refused examination ...	...	...	...	...	...	...	...	7
Addresses insufficient to trace or found to have removed to unknown addresses ...	...	...	...	...	...	...	...	54
Found to have removed to other districts and cases transferred ...	...	...	...	...	...	...	...	4
Serving in Women's Auxiliary Force and notification sent to appropriate authority ...	...	...	...	...	...	...	...	1
								<u>140</u>

SOCIAL WORK.

The County Council has two full-time Social Workers engaged in following up patients suffering from venereal disease, whether notified under Regulation 33B or attending the clinics voluntarily. By making friendly contact with the patients they impress on them the importance of continuing treatment to a conclusion and they endeavour to induce them to urge on the patient's contacts the importance of seeking treatment also; they endeavour also to remove obstacles in the way of continued treatment and to deal with the social and other difficulties of the patients. The value of the Social Workers has been found to be very great.

ANTI-V.D. PROPAGANDA.

During the past year the Central Council for Health Education has continued to carry out anti-V.D. propaganda on behalf of the County Council. Lectures were given by approved lecturers to a Mothers' Union, 16 Women's Institutes and a Townswomen's Guild, while film showings

were given at factories in the Woking, Carshalton, Wallington, Epsom, Ashtead and Leatherhead areas. In addition an approved letter was sent by the Central Council, accompanied by literature, to the Welfare Officers of over 400 Surrey factories, in which the services they were prepared to give on behalf of the County Council with a view to raising the general ethical standard of the community were set out.

LONDON AND HOME COUNTIES SCHEME.

In addition to the clinics for the treatment of Venereal Disease provided and staffed by the Surrey County Council, London and the Home Counties have a joint scheme approved by the Ministry of Health and managed by the London County Council whereby use is made of facilities provided by certain of the voluntary hospitals and hostels and London County Council clinics in the London area for the treatment of venereal diseases. The participating Local Authorities under the scheme are the County Councils of London, Buckinghamshire, Essex, Hertfordshire, Kent, Middlesex and Surrey, and the County Borough Councils of Croydon, East Ham and West Ham.

The following is a summary of the work done under this scheme during the year 1945, the figures in brackets showing the corresponding numbers for the preceding year :—

New Cases dealt with under the Scheme during the year 1945.

	<i>Whole Scheme.</i>		<i>Surrey Cases.</i>	
Syphilis	2,593	(2,143)	86	(69)
Gonorrhœa	5,700	(4,292)	160	(115)
Soft chancre	105	(102)	—	(2)
Diagnosed as not suffering from Venereal Disease	19,366	(14,802)	928	(743)
Total... ..	27,764	(21,339)	1,174	(929)

	<i>Whole Scheme.</i>		<i>Surrey Cases.</i>	
Total attendances of all patients ...	356,771	(343,782)	13,083	(12,872)
Number of in-patient days of treatment	14,043	(14,466)	200	(304)
Number of pathological examinations made :—				
(a) for or at centres	209,199	(170,861)	9,906	(8,864)
(b) for private medical practitioners	88,971	(73,784)	9,577	(8,041)

The following table shows the number of Surrey patients dealt with at the various Treatment Centres during 1945 ; for comparison column 16 gives the corresponding figures for 1938, the last full year before the war.

1945	S.C.C. Clinics.					London and Home Counties Scheme.	St. Bart's Hospital.	Central Middlesex County Hospital.	West Middlesex County Hospital.	Hillingdon County Hospital, Uxbridge.	Old Church County Hospital, Romford.	Alder-shot Clinic.	South Shields Clinic.	Total.	Total in 1938.
	Guild-ford.	Kingston	Redhill.	St. Helier	Woking										
	(1)	(2)	(3)	(4)	(5)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)
New Cases (Surrey). Syphilis	39	10	9	49	21	86	—	—	1	—	—	4	—	250	169
	(44)	(4)	(6)	(32)	(19)	(69)	(1)	(—)	(—)	(—)	(—)	(3)	(—)	(202)	
	—	—	—	—	—	—	—	—	—	—	—	—	—	—	5
	(—)	(—)	(—)	(—)	(—)	(2)	(—)	(—)	(—)	(—)	(—)	(—)	(—)	(2)	
Soft Chancere	88	19	21	41	41	160	2	—	8	1	—	8	1	451	508
	(60)	(16)	(28)	(47)	(53)	(115)	(1)	(—)	(1)	(1)	(—)	(5)	(—)	(399)	
Conditions other than Venereal	341	37	151	511	297	928	5	2	8	1	—	11	1	2,490	948
	(313)	(25)	(162)	(374)	(209)	(743)	(1)	(—)	(4)	(1)	(3)	(7)	(3)	(1,987)	
	468	66	181	601	359	1,174	7	2	17	2	—	23	2	3,191	1,630
Totals	(417)	(45)	(196)	(453)	(281)	(929)	(3)	(—)	(5)	(2)	(3)	(15)	(3)	(2,590)	
	4,490	1,033	1,239	8,840	1,888	13,083	71	5	209	8	—	226	5	35,350	41,482
All Cases (Surrey). Total number of attendances	(4,342)	(847)	(1,717)	(5,870)	(2,162)	(12,872)	(7)	(—)	(22)	(12)	(5)	(265)	(6)	(30,753)	

The figures shown in brackets relate to the year 1944.

BLIND WELFARE.

The number of blind persons whose names were on the register at the end of 1945 was 1,680 compared with 1,558 at the end of 1944. The total includes 23 then under training, 31 workshop employees and 56 workers in their own homes. There were 136 blind persons employed in "open" industry.

The Council's Scheme of Blind Welfare provides for the use of the Surrey Voluntary Association for the Blind as the Council's Agent in connection with the administration of Domiciliary Allowances to blind persons and their dependants. The Domiciliary Allowances are administered by a Committee comprising members both of the Association and of the Council, the latter being in the majority. A new scale became operative on the 1st January, 1945, which compares favourably with the scales of the most generous Authorities. At the end of the year such allowances were being made in 838 cases involving an annual rate of expenditure of £50,042 plus £1,700 in respect of coal. The number of beneficiaries at the end of 1944 was 738 and the rate of expenditure was £43,739 16s. 0d. a year.

The Association continued during the year to supplement in miscellaneous ways, out of their voluntary funds, the assistance given by the Council; £915 8s. 0d. was expended in this way during the year.

There are eight Home Teachers for the Blind employed by the County Council and who work in close co-operation with the Voluntary Association. During the year a greatly improved system of case papers has been brought into operation.

The Voluntary Association runs an apartment house for the blind in Surbiton, which was opened in September, 1944 and is full. Each blind person has her own room which is fitted as a self-contained flatlet; the number is 9. It is proposed to open another apartment house and the premises have been obtained in Kingston and are awaiting adaptation. The apartment house is designed for those who can wholly or almost wholly look after themselves and who already possess enough furniture to equip a room in an apartment house or hostel. The house provides accommodation for a house-keeper whose duties include the rendering of assistance in the way of cooking, cleaning, shopping, etc. for those residents who are themselves unable to perform all the necessary household duties.

There is another class of blind person—those who cannot care for themselves on account of old age or infirmity, and the County Council has approved the establishment of Homes for the Aged Blind. There will probably be two of these if suitable large houses can be acquired, each holding about 25-30 blind persons.

MILK AND DAIRIES.

(a) MILK (SPECIAL DESIGNATIONS) REGULATIONS 1936-46.

Very great attention has been given to the supervision of the production of Tuberculin Tested and Accredited Milks, and Mr. G. W. Harrison, County Health Inspector, is immediately responsible for this exceedingly difficult branch of the Public Health Department's activities.

The numbers of licences issued at 31st December, 1945, were :—

Tuberculin Tested Milk	...	...	...	...	...	170
Accredited Milk	...	...	...	...	...	341
						<hr/>
Total...	...	...	...	...	...	511
						<hr/>

This represents an addition of 31 Tuberculin Tested and a reduction of 15 Accredited licences compared with the previous year.

New licences have been granted during the year as follows :—

Tuberculin Tested Milk	...	...	...	...	...	40
Accredited Milk	...	...	...	...	...	16
						<hr/>
Total...	...	...	...	...	...	56
						<hr/>

The steady increase each year in the production of tuberculin tested milk (which is the highest grade of milk) is in accordance with the present drive to raise the standard of the milk supply of the country, and is very satisfactory.

A serious outbreak of foot-and-mouth disease was confirmed in Surrey on the 28th June, 1945, and the usual restrictions which were imposed were not lifted until the 24th August. A large number of animals were slaughtered by the Ministry of Agriculture and Fisheries. Whilst the outbreak of the disease and the consequent depletion of dairy herds is most unfortunate, one redeeming feature was that certain of the producers affected took the opportunity, when re-stocking, of starting to produce Tuberculin Tested Milk.

On four other occasions during the year parts of the County were included in the infected areas which were declared consequent upon outbreaks of foot-and-mouth disease in adjoining counties.

The improvement of existing premises, equipment and methods used in the production of designated milks has continued, and the adoption of good standards in the cases of new applications is insisted upon. Substantial improvement of many dairy farms in the county is in hand, including the erection of completely new buildings to displace old structures or to increase existing premises.

During the year the Ministry of Agriculture and Fisheries issued an important publication on Farm Buildings. This document confirms the standards aimed at in Surrey and is of great assistance in dealing with the production of designated milks.

In addition to the 56 new licences granted during the year, 71 proposed applications have been investigated and reported upon, and advice given to the proposers; this is exclusive of extensions or improvement of existing licensed premises.

The water supplies in connection with certain farms have proved to be unsatisfactory from the points of view of both adequacy and quality, and applications for licences to produce designated milk have, consequently, had to be refused. In such cases the producers have been eager to comply with the requirements, but in certain cases have been unable to obtain a connection to the public mains.

The attention of the Local Authorities concerned has been drawn to this important matter, with the request that they take action under the Rural Water Supplies and Sewerage Act, 1944. The Surrey War Agricultural Executive Committee has been very helpful and in addition to offering financial assistance to the applicants, has also pressed for early action by the Authorities.

Routine sampling of the designated milks has continued, and the samples have been submitted to the prescribed methylene blue and coliform tests. The outbreaks of foot-and-mouth disease, already referred to, interfered with this service owing to the temporary cessation of sampling in the infected areas declared by the Ministry of Agriculture and Fisheries. These areas extended over a large part of the County, and routine milk sampling and other visits to the farms therein were consequently held up for the time, so that fewer samples were taken during the year than usual.

The following gives details of the sampling :—

No. of samples taken	...	...	...	...	...	...	1,634
<i>Unsatisfactory samples :—</i>							
Failed Methylene blue test only	...	...	...	...	...	...	40
Failed Coliform test only	...	...	...	...	...	...	32
Failed both tests	...	...	...	...	...	...	33
Total...							<u>105</u>

The number of unsatisfactory samples represents 6.42 per cent. of the total number taken, compared with 6.58 per cent. in the previous year and 11.9 per cent. in the peak year 1942.

Unsatisfactory samples are followed up and suitable action taken: The producers concerned have given attention to the position and in no case has it been necessary to withdraw a licence.

The number of samples taken during the year average 3 per producer. This number, however, includes "concentrated" sampling where necessary in connection with special investigations on certain farms, and it is felt that the number of routine samples taken is insufficient. The desirability of increasing the sampling service is accordingly receiving the attention of the Public Control Committee and definite proposals will be made at an early date.

(b) TUBERCLE-INFECTED MILK.

Twelve notifications were received during the year from Medical Officers of Health to the effect that samples of milk taken by them and produced in Surrey had been found on biological examination to be tubercle-infected. This compares with 17 similar notifications in 1944. Each notification was carefully investigated and all the herds involved were clinically examined by the Divisional Veterinary Inspector of the Ministry of Agriculture and Fisheries.

INSPECTION AND SUPERVISION OF FOOD.

FOOD AND DRUGS ACT, 1938.

The number and kind of samples analysed during the year 1945 under this Act are shown in the following table :—

Articles.	Number of Samples Analysed		Number Genuine		Number Adulterated.		Prosecutions.	Convictions.
	Formal.	Informal.	Formal.	Informal.	Formal.	Informal.		
Milk	670	150	603	127	67	23	9	9
Confectionery and Jam	4	8	4	8	—	—	—	—
Flour	7	2	5	2	2	—	—	—
Sausages	12	—	11	—	1	—	—	—
Sausage Meat ...	9	2	8	2	1	—	—	—
Coffee, inc. Essences	—	5	—	4	—	1	—	—
Meat Extract ...	—	3	—	3	—	—	—	—
Vinegar	3	—	3	—	—	—	—	—
Drugs	1	8	1	8	—	—	—	—
Wine	32	18	9	8	23	10	6	6
Spirits... ..	7	19	7	15	—	4	1	1
Other Articles ...	8	36	7	32	1	4	—	—
Totals	753	251	658	209	95	42	16	16

The Chief Officer of the Public Control Department has supplied the following additional particulars regarding adulterated formal samples :—

(a) *Milk.*

- 21 Samples were deficient in milk fat. In 3 cases producers were advised re mixing milk, some of their cows giving poor quality milk. In 3 cases a deficiency of 7-11 per cent. milk fat was due to natural causes and confirmed by "appeal to cow" samples. In 1 case only was the deficiency (35 per cent.) attributable to the seller, who was prosecuted, when a fine and costs, amounting to £7 5s. 0d., were imposed.
- 17 Samples were deficient in solids-not-fat but the freezing point (Hortvet) test did not confirm the presence of added water.
- 1 Sample was reported as improperly pasteurised and the Local Authority notified.
- 28 Samples contained added water. 8 prosecutions were instituted and convictions secured in every case: fines and costs amounted to £74 10s. 0d. One of these convictions is the subject of an appeal to the Divisional Court.
- In several prosecutions more than one watered sample was included.

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(b) *Wines.*

Considerable attention was paid by the Department during the past year to the sampling of wines. The shortage of imported wines gave rise to liquids, prepared in simulation of those wines, being sold under descriptions calculated to mislead the purchaser.

In addition to the 6 prosecutions instituted under the Food and Drugs Act, 1936, shown in the above Table, legal proceedings were also taken in nine cases under the Defence (Sale of Food) Regulations 1943. The former related to British wines of Port Type sold as genuine Port Wine, while in the latter the liquid was cider of varying strength, coloured and flavoured, and sold under descriptions intended to lead purchasers to believe they were buying genuine British wines of Port, Sherry or Vermouth types prepared from grape juice. Convictions were obtained in every case before the appropriate Petty Sessional Court, but the convictions in respect of a group of six summonses taken under the Defence (Sale of Food) Regulations were quashed on appeal to Quarter Sessions.

The task of determining the method of manufacture of wine by analytical means proved extremely difficult and necessitated a great deal of research by the Council's Public Analysts. It can be recorded with satisfaction, therefore, that in no case was the evidence offered to the various Courts by Mr. D. D. Moir successfully disputed.

As a direct result of the above proceedings, and similar proceedings taken by other Food and Drugs Authorities, the Ministry of Food introduced fresh legislation dealing with this matter, and a new Order amending the Labelling of Food (No. 2) Order, 1944, was made, the effect of which is that as from April, 1946 the labels of British Wines must contain an appropriate description of the product, a clear indication of the fruit basis from which it is made and a statement of its alcoholic content. Furthermore, restrictions are now imposed on the unqualified use of the word "wine" and the appellations of imported wines.

(c) *Miscellaneous.*

Apart from the milk and wine samples already mentioned the remaining adulterated samples, which were minor infringements, were dealt with by administrative action. Where formal samples were reported adulterated, deteriorated or below the prescribed standard the seller was invariably notified by letter and in two instances the manufacturers were advised.

The Department also co-operated when necessary with the local Food Executive Committees, thus enabling them to prosecute for infringements under the Maximum Prices Orders.

HOUSING.

The Joint Committee consisting of representatives of the five Rural District Councils and of the County Council, formed in accordance with the recommendations of the Third Report on Rural Housing of the Rural Housing Sub-Committee of the Central Housing Advisory Committee, has continued its work.

Standards in connection with housing requirements have been agreed and a common basis for a complete survey has been laid down.

The survey is proceeding as rapidly as the limited staffs available will permit; the urgency of the matter is fully appreciated and every endeavour is being made to complete the survey as soon as possible. The results of the survey will show the position accurately so far as existing working class houses are concerned; the condition of each of these houses will be ascertained. On the 31st December, 1945, out of 24,542 houses to be surveyed in the five Rural Districts, 9,385 had been fully surveyed and classified. The following table shows the classification of these 9,385 working class houses already surveyed :—

1. Satisfactory in all respects	...	...	...	...	...	...	...	2,239
2. Minor defects	...	...	...	...	...	...	...	3,648
3. Requiring repair, structural alterations or improvements	...	...	...	...	...	...	...	2,260
4. Appropriate for reconditioning under the Housing (Rural Workers) Acts	...	...	...	...	...	...	...	151
5. Unfit for habitation and beyond repair at a reasonable expense	...	...	...	...	...	...	...	536
6. Not yet classified	...	...	...	...	...	...	...	551

The number of houses erected in all the Sanitary Districts in the County during 1945 was 210; the number in course of erection at the end of the year was 755. These figures in both cases include temporary houses and bungalows and "two-year" hutments, etc.

The number of inhabited houses on the rate books on the 31st December, 1945 was 344,683.

Reference has already been made (page 32) in another part of this report to the problem of the Chronic Sick, and to the measures which the County Council as a hospital authority is taking to deal with this problem in conformity with modern knowledge and ideas. There is another and associated problem, however, the solution of which falls properly within the province of the Housing Authorities, and that is the problem of the aged who are neither sick nor infirm; these ought to be kept within the ordinary community life amongst their friends and neighbours; the problem here is one of suitable housing. The following figures show both the magnitude and the urgency of the problem :—

Population of Great Britain.

Year.	Total.	Over 60 years of age.
1901	38.24 millions	2.41 millions
1944	48.94 „	6.33 „

These figures show that the percentage of persons over the age of 60 has increased from 6.3 to 12.9 since the beginning of the present century.

The following table shows the increased expectation of life in 1944 as compared with 1901.

	1901	1944
Males	44.1 years	61.7 years
Females	47.8 years	67.4 years

